**Annexure Academic Session - 1.1**

**SEMINAR/REVIEW FOR DNB/DrNB/FNB TRAINEES**

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**Signature of the Candidates**

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| **Signatures of Head of the Department/ Course Director with stamp** | **Signature with official stamp of Administrative Head of the Institute/Hospital**  (Authorized signatory on behalf of applicant hospital) |

**Annexure Academic Session - 1.2**

**JOURNAL CLUB FOR DNB/DrNB/FNB TRAINEES**

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| **Signatures of Head of the Department/ Course Director with stamp** | **Signature with official stamp of Administrative Head of the Institute/Hospital**  (Authorized signatory on behalf of applicant hospital) |

**Annexure Academic Session - 1.3**

**BASIC SCIENCES LECTURE FOR DNB/DrNB/FNB TRAINEES**

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| **Sl. No.** | **Date** | **Topic** | **Presenter’s Signature** |
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**Signature of the Candidates**

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| **Signatures of Head of the Department/ Course Director with stamp** | **Signature with official stamp of Administrative Head of the Institute/Hospital**  (Authorized signatory on behalf of applicant hospital) |

**Annexure Academic Session - 1.4**

**CME/WORKSHOP/CONFERENCE FOR DNB/DrNB/FNB TRAINEES**

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**Signature of the Candidates**

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| **Signatures of Head of the Department/ Course Director with stamp** | **Signature with official stamp of Administrative Head of the Institute/Hospital**  (Authorized signatory on behalf of applicant hospital) |

**Annexure Academic Session - 1.5**

**INTERNAL EVALUATION CONDUCTED BY DEPARTMENT**

**FOR ONGOING DNB/DrNB/FNB TRAINEES**

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| **Sl. No.** | **Date of Evaluation** | **Nature of Evaluation (Theory Exam, Clinical Examinations, Viva etc)** | **Names of participating Trainees** | **Signature of Participating trainees** |
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| **Signatures of Head of the Department/ Course Director with stamp** | **Signature with official stamp of Administrative Head of the Institute/Hospital**  (Authorized signatory on behalf of applicant hospital) |