ASSOCIATION OF PEDIATRICS



Indian Academy of Pediatrics - Tamil Nadu State Chapter இந்திய குழந்தை மருத்துவக் குழுமம் - தமிழ்நாடு மாநிலப் பிரிவு



DR. V. BALAGOPAL RAJU ACTIVE PEDIATRICIAN AWARD

Indian Academy of Pediatrics – Tamil Nadu State Chapter confers Dr. V. Balagopal Raju Active Pediatrician award to its members who have made significant contributions in Child Health, Pediatric Education, Research, Medical Publication and Community Pediatrics, beyond their routine duty or holding some position in the organization.

The number of awards that will be conferred shall not exceed the number of Executive Board Members from the particular district. For Example, a branch with ONE Executive Board Member will be eligible for ONE award, TWO Executive Board Member for TWO awards and so on. The nominee for the Active Pediatrician Award should have been a Life member of the Indian Academy of Pediatrics for 5 years before submission of his/her nomination to the IAP TNSC. The enrolment year of the membership of the nominee shall be taken as full year of membership for the purpose of computing 5 years of membership.

The applicant shall submit their nomination in the prescribed form filled properly. A duly signed consent of the nominee stating that he /she is willing to be nominated for the Active Pediatrician award should accompany the nomination form. The application shall be proposed by the Fellows or Life Members of IAP-TNSC and seconded by the President/ Secretary of the district IAP branch to which the nominee belongs to. The proposer should have been Life member of the Indian Academy of Pediatrics for 10 years before proposing the name of any member for the Active Pediatrician Award. Any member is entitled to nominate only one nominee in a year.

- Essential criteria Life Member of IAP at least 5 years
- Credit will be given to the following
 - 1. Seniority
 - 2. Contribution to Pediatrics in general and IAP in particular
 - 3. Academic work
 - 4. Contribution in research
 - 5. Papers published
 - 6. Participation in Pediatric and other allied conferences.
 - 7. Promotion of Child Welfare
- Decision regarding the awardee will be made by the Core committee of IAP TNSC and is final. If the committee feels uniformly against giving the award to anyone of the nominees in view of not qualifying for the award, the award will not be given for the year.

•	The awardee will be presented with a plaque and certificate. Awardees will NOT have the opportunity to deliver an acceptance speech when receiving the award due to time constraints.				
•	Any pending dues of applicant's branch should have been cleared, else the nomination will not be considered				
•	Submissions without the duly filled nomination form or sent later than cut - off date will be rejected.				

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DR. V. BALAGOPAL RAJU ACTIVE PEDIATRICIAN AWARD NOMINATION FORM

Name of the Nominee					
National IAP Membership No.:					
Nominee's Address:			Affix passport size self-attested photograph		
Mobile number Email			photograph		
Essential criteria	Life Member of I	AP for at least 5 years			
Declaration by the Nominee					
I hereby declare that I consent to this nomination for Active Pediatrician Award of Indian Academy of Pediatrics-Tamilnadu State Chapter. I also declare that the supportive information given for this application is true to the best of my knowledge					
Nominee's Signature with date:					
Name of proposer & Membership N	0:				
Proposer's Address:					
Proposer's Signature with date:					
Name of Branch President/ Secreta	ry with IAP No:				
Branch President/ Secretary Contac	et No:				
Branch President/ Secretary Signat	ure with date:				

Supporting Details for the Awards Name of the Nominee National IAP Membership No.: Nominee's Address: Mobile number **Email Duration of IAP Membership** 1. **Academic Qualifications** 2. Role in National IAP Office Bearer a. **Executive Board Member** b. Convener of IAP Committee/Task force Program Member of IAP Committee/Task force Program d. Trainers in National IAP Programme e. 3. Role in IAP TNSC Office Bearer a. **Executive Board Member** b. Convener of IAP TNSC Committee/ Programme d. Member of IAP TNSC Committee/ Programme 4. Role in IAP Subspecialty Chapters Office Bearer a. **Executive Board Member** b. Convener/ Member of Academic Committees C. Role in District IAP 5. Office Bearer a. **Executive Board Member** b. Role in International Pediatric Societies 6. Office Bearer a. **Executive Board Member** b.

7. Contribution to National Conference

- a. Chairperson
- b. Secretary
- c. Treasurer
- d. Joint Organizing Secretary
- e. Any other Position
- 8. Contribution to State Conference
 - a. Chairperson
 - b. Secretary
 - c. Treasurer
 - d. Joint Organizing Secretary
 - e. Any other Position
- 9. Contribution to Regional conference, CME programs, Symposia, Seminars, Workshops
 - a. Please specify designation with the exact responsibilities
- 10. Faculty in IAP Conferences
 - a. National
 - b. State
 - c. Regional
- 11. Awards of Professional Recognition (Specify the name (s) of the Awards with year)
 - a. International
 - b. National
 - c. State
 - d. District
- 12. Details of Publications:
 - a. Books published with their titles (Publishers and year of publication) please specify whether single or multiple editors/authors.
 - b. Chapter Contribution to Books.
 - c. Publications in Medical Journals (attach a list of complete references of publication please do not include articles submitted for publication).
 - d. Publications in other Print media (Child health related articles in newspaper, magazines, school books etc. Details or title. Magazine and date/year of publication, etc. to be provided).

- 13. Representation in International/National Organization/ Committees/ Bodies/ Institutions.
 - a. International Organization e.g. UNICEF, WHO, etc.
 - b. Membership of Expert Committees National/ State (e.g. Task Force of ICMR, Ministry of Health and Family Welfare, National Medical Council, etc. Please specify the title of the post held, name of the Committee and years of serving).
 - c. Visiting professorship and other assignments beyond the purview of routine duties. (Please specify the University/ Assignment and years)
- 14. Contribution made towards Child Welfare activities (National/ State/ District)
 - a. IAP Celebration Days
 - b. Breastfeeding Promotion
 - c. Immunization including PPI
 - d. Promotion of Rational Newborn care
 - e. Blood donation
 - f. Care of Homeless & Specially Abled Children
 - g. IAP membership drive
 - h. Medical camps
 - i. Public Health Education
- 15. Any other outstanding contributions, which are not highlighted above.

Documents

- 1. ID proof
- 2. Proof for all activities