



THE AIIMSONIANS
(Alumni Association of AIIMS)

Identity Card issued _____
GUEST / FULL Member

Application form for Membership

Please affix one recent
Passport
size photograph here
and give one
more photograph
with this form
for the laminated
I-Card

Dear Secretary,

I wish to apply for membership of **The AIIMSONIANS**. My particulars are as under:

Name (in CAPITALS) _____
Date of birth (dd/mm/yy) _____ Gender: _____ Male/Female
Category eligible (*see overleaf*) _____ Type of membership: _____ Full/Guest
First degree/course/job pursued at AIIMS (Please attach proof/scan and send) _____
Month and year of joining AIIMS _____ If MBBS Alumnus: _____ Batch No.: _____
Faculty at AIIMS: No/Yes (Department _____) Roll No. : _____
Permanent postal address (with Zip/pincode) _____

Specialised in 1. _____ 2. _____ 3. _____

Present address _____

Telephone no: Work* _____ Residence _____ Mobile* _____

Fax No. _____ E-mail* _____

(*mandatory)

Name of spouse _____ Name(s) of child(ren) : _____

Marriage anniversary _____

Account payee cheque/Demand draft should be drawn in favour of "**The AIIMSONIANS**"

Please add ₹ 50 for cheques from outside Delhi

Please submit this form with one extra photograph to

"The AIIMSONIANS" Office, Room No. 38A, Pre-clinical Block, AIIMS, New Delhi 110029, India

Telephone: +91-11-26594461, 26594991, Fax: +91-11-26588663 (ATTN: The AIIMSONIANS)

OR scan and send by email along with proof of degree/course/job done at AIIMS. On receipt of form by email we will inform bank details for payment of membership fee.

e-mail: aiimsonians@aiimsonians.org website: www.aiimsonians.org

FOR OFFICE USE

Membership Category: **A1/A2/A3/A4/B/Guest**

Received ₹ _____ by Cash/DD/Cheque no. _____

Drawn on Bank: _____

Receipt (Issued) No. _____ Identity card issued on : _____

Membership allotted on: _____

Dr Neerja Bhatla
Secretary, TheAIIMSONIANS

Important Excerpts from the Constitution of “The AIIMSONIANS”

4. **Membership of the AIIMSONIANS:**

Members will be enrolled only as life members. Members enrolled at the Head Office of the AIIMSONIANS shall be known as primary members. Type of life membership will be as follows:

4.1 **Full membership:** The following are eligible for full membership. On becoming full members, they are entitled to call themselves: Members of “The AIIMSONIANS”.

4.1.a **Group A shall comprise of:**

A1 Those who have completed any postgraduate medical/paramedical course from AIIMS (MD, MS, PhD, MSc, DM, MCh, MHA, MDS, etc.)

A2 Faculty of AIIMS (past or present).

A3 All those who have completed an undergraduate medical/paramedical degree/diploma course at AIIMS.(e.g. BSc Nursing, PC Nursing, BSc Human Biology, etc.) of at least 3 years duration.

A4 Any one who has worked for at least 3 continuous years in an academic medical job at AIIMS.

4.1.b **Group B shall comprise of medical graduates (MBBS) of AIIMS.**

4.2 **Guest membership:** Open to any one (including Indian/Foreign visitors) who has worked/participated in any academic activity at AIIMS continuously for at least 6 months but is not eligible for full membership. (*Please attach proof*). Such members will be called “Guest AIIMSONIANS”. This membership is solely given at the discretion of the Executive Committee and guest members will not have the facility to use the B.B.DIKSHIT Library .

4.3 **Membership fees: (w.e.f. 15 April 2012)**

- ₹ 3500 for Indian Residents and for residents of SAARC countries.

- US\$ 300 for all others

- Special membership drives: Please contact The AIIMSONIANS office or send an e-mail to aiimsonians@aiimsonians.org

7. **Executive Committee:**

7.1 **Composition:**

It shall consist of **6 office bearers (1 President, 2 Vice Presidents, 1 Secretary cum Treasurer, 2 Joint Secretaries)** and **10 executive committee members (6 elected from Group B as in clause 4.1.b., i.e. medical graduates (MBBS) from AIIMS and one each elected/co-opted from Group A as in clause 4.1.a., i.e. Groups A1, A2, A3, A4).** Only Group B members (as in clause 4.1.b) can hold posts of office bearers of the Executive Committee.

Guest members have no voting rights in the elections/meetings of “The AIIMSONIANS” but enjoy all other rights of a full member.

I have read and understood the rules as above and promise to abide by them. I also understand that I can be debarred from the membership by the Executive Committee if I indulge in any activity unbecoming of The AIIMSONIANS.

Date of Application : _____

Signature: _____

Name: _____