



THE AIIMSONIANS
(Alumni Association of AIIMS)

Application form for Membership

I. Card issued on : _____
GUEST / FULL Member

Please affix one recent P.P.
size photograph here
and give one loose
extra photograph
with this form
for the laminated
I-Card

Dear Sir/Madam,

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

Name (*in caps.*) : _____
Date of Birth : _____ Gender : Male/Female
Category Eligible (*See below*) : _____ Type of membership Eligible: Full/Guest
First Degree / Course / job pursued at AIIMS/ (*Please attach proof*): _____ Faculty of AIIMS : No / Yes
Month & Year of entry at AIIMS : _____ If MBBS Alumnus- Batch No.: _____
Roll No. : _____
Full Postal Address (*with Pin Code*): _____ Specialise in 1. _____
(*Please attach proof of recent nature*) 2. _____
3. _____

Currently residing in (Country) : _____

TELEPHONE NO. : Work Place : _____ Residence: _____

Fax No. _____ E.Mail: _____ Cell-Phone: _____

Spouse & Children's Names :

Spouse: (Name) _____ Children : (Names) _____

Marriage Anniversary _____

* Please add Rs. 50/- for cheques from outside Delhi.

* The Cheques/ DD should be drawn in favour of "The AIIMSONIANS" and should be crossed.

* Please return this form with: "The AIIMSONIANS" Office, Room No. 38A, Pre-clinical Block
one extra photograph to AIIMS, New Delhi - 110 029. E-mail: birsingh43@gmail.com

Phone No.: 2659 4461, 2659 4985, Fax: 011-2658 8663

Website: www.aiims.ac.in

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".

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

- 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 a undergraduate medical/ paramedical degree/diploma course at AIIMS. (e.g., B.Sc. Nursing, P.C. Nursing, B.Sc. Human Biology etc.) of atleast 3 years duration.
- A4* Any one who has worked for at least 3 continous 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 Periodically only**

Open to any one (including Indian/Foreign visitors) who has worked/participated in any academic activity at AIIMS for a continous period of at least six months but is not eligible for full membership. (*Please attach proof*). Such member will be called the "Guest AIIMSONIANS". This membership is solely given at the discretion of the E.C..

4.3. **MEMBERSHIP FEES: (Revisable)**

Currently: (w.e.f. 01st June, 2000)

- Indian Rs. 1500/- for Indian Residents and for residents of other SAARC countries.
- U.S. Dollars 300/- for all others
- Special Membership drives : Fees Varies.

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7. **EXECUTIVE COMMITTEE:**

7.1 **COMPOSITION:**

It shall consists 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 amongst 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 the 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 against the interests of The AIIMSONIANS.

Date of Application : _____

Signature: _____

Name: _____

Membership Category: _____

FOR OFFICE USE ONLY

Received Rs. _____ /-by Cash/D.D./Cheque* No. _____

Drawn on Bank: _____

Receipt (Issued) No. _____

I. Card issued on : _____

Dr. Bir Singh
Secretary

Date of allotting membership: _____

The AIIMSONIANS

(*Subject to realisationn)