CIRCULAR

6 DAYS CME PROGRAMME FOR TEACHERS OF PRASUTI TANTRA AND STRI ROGA
(22ND NOV TO 27TH NOV)
SPONSORED BY MINISTRY OF AYUSH, NEW DELHI
CO-ORDINATED BY RASHTRIYA AYURVEDA VIDYAPEETH, NEW DELHI

Date: 01/10/2021

To,
The Principal / Director / Dean,
All Ayurveda Colleges in India.

Subject: Inviting Applications for 6 days CME for Teachers of Prasuti Tantra and Stri Roga


Dear Sir/Madam,

With reference to the subject cited above, it is our pleasure to inform you that Department of Prasuti Tantra and Stri Roga, NIA is organizing a 6 days CME programme from 22nd November to 27th November 2021 for Teachers of Prasuti tantra and Stri Roga. This CME is sponsored by the Ministry of AYUSH and co-ordinated by Rashtriya Ayurveda Vidyapeeth, New Delhi.

I request you to kindly depute one teacher from your institute for attending the CME. Since the number of trainees is limited to 30, please send the application as early as possible. The details of the CME and Application Form are annexed for your reference and use.

Thank you.

Prof. Sanjeev Sharma
Director cum Vice- chancellor (I/C)
National Institute of Ayurveda,
Deemed to be University (De Novo),
Jaipur (Raj.) – 302002

Jorawar Singh Gate, Amer Road, Jaipur-302002
Tel.fax : 0141-2635816, Website : www.nia.nic.in, E-mail : nia-raj@nic.in
## DETAILS OF CME

<table>
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<tr>
<th>Name of the CME</th>
<th>6 DAYS CME PROGRAMME FOR TEACHERS OF PRASUTI TANTRA AND STRI ROGA</th>
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<td><strong>Duration</strong></td>
<td>22&lt;sup&gt;nd&lt;/sup&gt; November to 27&lt;sup&gt;th&lt;/sup&gt; November 2021 (6 days)</td>
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<td><strong>Venue</strong></td>
<td>Committee Hall, NIA, Jaipur</td>
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| **Eligibility of Trainees** | • Teaching faculty of Prasuti Tantra and Stri Roga working in recognized Ayurveda College.  
• Teachers who have already attended 2 CME programmes in the year 2020 – 21 will not be eligible. |
| **Maximum no. of Trainees** | 30 (Thirty)                                                      |
| **Procedure to Apply** | • Eligible teachers can apply by filling the enclosed Application Form, duly recommended by the Head of the Institution.  
• Application form along with self attested copies of Educational Qualifications and Aadhar Card should be sent through mail on or before 5 pm of 31.10.2021.  
• Application which are incomplete and received after the due date will not be considered. The applicant can scan the entire application and send it to cme.pthr.nia.2021@gmail.com as a single pdf. |
| **Procedure of Selection** | • Guidelines of RAV CME scheme will be applicable.  
• Selected participants will be informed by email on or before 05.11.2021 |
| **Payment of TA** | • Actual fare or up to the rail fare of AC 2 tier class, whichever is less. Payment of TA & journey DA will be made only at the end of the programme.  
• Food expenses during journey up to maximum Rs. 175/- is payable at production of bills.  
• No food expenses will be paid if journey is made by Shatabdi / Rajdhani / Duronto trains. Payment will be made directly to the bank account by electronic transfer. Reimbursement of journey performed by road is permissible for the places which are not connected by rail.  
• The road mileage will be limited to 2 AC rail charges or actual claim, whichever is lower.  
• **Please be noted that TATKAL or DYNAMIC PRICING Train Tickets will not be reimbursed.**  
• The payment of TA and food bills shall be made only on production of original tickets/bills. |
| **Lodging and**     | • The trainees will be provided the best possible lodging and |
| Participation certificate | certificate.  
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<td>The certificate will be issued at the end of the CME</td>
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| Organizing committee      | • Patron- Vaidya Rajesh Kotecha, Secretary, Ministry of Ayush, Govt of India |
|---------------------------|• Organizing Chairman- Prof. Sanjeev Sharma, Director cum Vice-Chancellor (I/C), NIA, Jaipur |
|                           |• Organizing Secretary   Prof. Bharathi Kumaramangalam, HOD. Dept. of Prasuti Tantra and Stri Roga |
|                           |• Organizing Joint Secretaries – Dr. B. Pushpalatha, Asso. Prof. Dr. Hetal H. Dave, Asso. Prof |
|                           |• Co-ordinators – Dr. Sonu, Asst. Prof (Mob. 7597056107) Dr. Poonam Choudhary, Asst. prof. (Mob. 9352311106) Dr. Anu. M. S. Clinical Registrar (Mob. 8281801649) |

E-mail – cme.ptsr.nia.2021@gmail.com  
Details are also available on Institute’s website – [http://nia.nic.in](http://nia.nic.in)

With warm regards,

Yours faithfully,

Prof. Bharathi Kumaramangalam  
Secretary Organizing Committee,  
Head, Department of Prasuti Tantra and Stri Roga  
National Institute of Ayurveda  
Deemed to be University (De-Novo)  
Jorawar Singh Gate, Amer Road,  
Jaipur - 302002 (Rajasthan)  
Mob. No. 9492047131
APPLICATION FORM
CME for Teachers of Prasuti Tantra & Stri Roga
22nd to 27th November 2021
(Sponsored by Ministry of AYUSH, Govt. of India, New Delhi & Co-Ordinated by Rashtriya Ayurved Vidyapeeth, New Delhi)

To,
Prof. Bharathi Kumaramangalam
Secretary Organizing Committee,
Head, Department of Prasuti Tantra and Stri Roga
National Institute of Ayurveda
Deemed to be University (De-Novo)
Jorawar Singh Gate, Amer Road, Jaipur – 302002

E-mail – cme.ptsr.nia.2021@gmail.com

Madam,
I hereby submit my application to participate in 6-days CME Programme for AYUSH teachers of Prasuti Tantra & Stri Roga, being organized by your institute. My details are as follows.

Full Name: ………………………………………………………………………………………………..
(In BLOCK letters)
Father's /Husband’s Name …………………………………………………………………………..
Date of Birth: ............................... Age : .......................... Gender : ………………..
Educational Qualification:………………………………………………………………………………

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<th>Name of Degree</th>
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Registration No:………………………… CCIM Teachers code:…………………
Designation:………………………….. Department: .................................
Name of Institute: ..............................................................
Experience:……………. Years. Months
Have you participated in ROTP/ CME earlier: YES / NO
If yes, details of ROTP/ CME should be completed by candidate –

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<th>SR. No</th>
<th>ROTP/CME</th>
<th>Organizing institute</th>
<th>Dates (From – To)</th>
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Full address for correspondence with pin code:
1) Office ………………………………………………………………………
……………………………………………………………………
2) Residence: ………………………………………………………………………
……………………………………………………………………
3) Telephone with STD code: ………………………………………………………………………
4) Mobile number: ………………………………………………………………………
5) Email id: ………………………………………………………………………
6) Adhar No. (Attach a copy) ………………………………………………………………………
7) Bank Details:
   Name of Bank: ………………………………………………………………………
   Branch: ………………………………………………………………………
   Account No.: ………………………………………………………………………
   IFSC Code: ………………………………………………………………………

The information furnished above is true and correct as per the best of my knowledge and I accept full responsibility for the same, I shall abide the instruction given by the organizer for the smooth conduction of program.
Date : ………………….

(Recommendation of the Head of the institute) (Signature of Applicant)

Application will not be considered if
1. If the information given above is incomplete in any respect.
2. If not recommended by the Head of the Institute.