**Dr. Udipi Madhvanath Memorial AFOMP Best Ph.D. thesis in Radiobiology**

# Nomination Form 2022

Nominee Details:

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| --- | --- | --- |
| 1. | Name of the nominee: |  |
| 2. | Name of AFOMP national member  organization of which the candidate is a member: |  |
| 3. | Date of birth (dd-mm-yyyy): |  |
| 4. | Correspondence address: |  |
| 5. | Email: |  |

Institution Details:

|  |  |  |
| --- | --- | --- |
| 1. | Candidate PhD awarding Year |  |
| 2. | Title of the PhD Thesis: |  |
| 3 | Please attach a copy of the student ID or letter of acceptance from the  institute. | * Yes ☐ No |
| 4. | Institute name and full address: |  |
| 5. | Principal Supervisor or Programme  Coordinator Name: |  |
| 6. | Signature and Stamp of the Principal Supervisor or Programme Coordinator: |  |

Publication Details:

Nominator Details:

|  |  |  |
| --- | --- | --- |
| 1. | Name of the nominator: |  |
| 2. | Name of AFOMP national member organization of which the nominator is  a member: |  |
| 3. | Nominator’s role: | * President * Secretary General * Other, please specify: \_ |
| 4. | Email: |  |

Declaration:

I hereby declare that the information provided above is true and accurate.

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| ………………………………………... | …………………………………….…. |
| Signature of the Nominator | Signature of the Nominee |
| Date: | Date: |

Instructions:

Email the completed form to the AFOMP Secretary General at: [sg.afomp@gmail.com](mailto:sg.afomp@gmail.com)

A PhD student ID/letter of acceptance must be submitted together with this application form.