

CALL FOR APPLICATIONS

Indian Pediatrics

Announces 17th Workshop on

“ART AND SCIENCE OF WRITING A PAPER”

*23rd -24th September 2019, Auditorium, Indraprastha Apollo Hospital,
New Delhi*

- Useful for researchers/faculty/residents working in any medical specialty or subspecialty.
- A two day hands-on training on preparing an article for publication as per standard guidelines of Biomedical Journals.
- Specific Sessions will be devoted to writing Title, Abstract, Scientific English, responding to reviewers, proofreading and International publication norms with practical exercises.

Highlights: Discussion on IMRAD and PICOT formats, Panel discussion on Publication Ethics, Session on using Reference management software.

How to Apply

Registration will be limited to 36 participants (by selection). Young faculty in their early career will be preferred. Send your completed application in the questionnaire (available at www.indianpediatrics.net) along with a brief CV and DD/at par cheque for Rs. 5,500/-. You can also transfer the amount to the bank account of Indian Pediatrics after finding out details from the office at 011-46052593. Participants have to arrange their own travel and accommodation. We can provide a list of reasonable accommodation in the vicinity of the venue to the participants traveling to Delhi.

Demand draft/cheque at par should be issued in favor of “Indian Pediatrics” payable at Delhi.

Send your Application to:

Dr. Dheeraj Shah,
*Editor-in-Chief,
Indian Pediatrics,
115/4, Ground Floor,
Gautam Nagar, New Delhi – 110 049.*

Email: jiap@nic.in; dheerajshah.indianpediatr@gmail.com
Tel: 011-46052593(Journal Office); Mobile: 09873919792, 09250304757

Application for the Indian Pediatrics 17th Workshop on

“ART AND SCIENCE OF WRITING A PAPER”

*23rd-24th September 2019, Auditorium, Indraprastha Apollo Hospital,
New Delhi*

Name _____

Date of birth __/__/____ Gender: Male/Female

Correspondence Address _____

Telephone No: Home _____ Office _____

Mobile _____ Email _____

Present designation _____

Office/Clinic Address _____

Education and Qualifications (Degree, Date awarded) _____

What you would hope to learn from this training and how this knowledge/skill will be used when you return home _____

Publications: Number accepted in Journals indexed in Medline/PubMed _____

Numbers of Papers submitted for publication but rejected: _____

Draft no and details: _____

Signature: _____ Date _____

*Please return your **fully completed** application form to: **Dr. Dheeraj Shah**,
Chief Organizer and Editor-in-Chief, Indian Pediatrics, 115/4, Ground Floor,
Gautam Nagar, New Delhi – 110 049.*

Email: jiap@nic.in, dheerajshah.indianpediatr@gmail.com

Good Luck with your application!