**DR. B. V. SATYANARAYANA MEMORIAL AWARD 2018 FOR BEST THESIS: APPLICATION FORM**

**(This will be retained by the Hon. Secretary General and will not be passed to evaluators)**

Application no (for office use):

IADVL PLM/LM No:

Name:

Age/Sex:

Qualification:

Institution:

Date of passing MD/DNB examination:

Name of the University to which thesis/dissertation was submitted:

Title of thesis/dissertation:

Name and affiliation of the thesis/dissertation guide:

Signature of the applicant:

Remarks (mentioning that he/she is a bonafide member of ADVL) of Head of Department:

Signature of Head of Department Signature of Guide Signature of Co-guide