



**INTERNATIONAL ACADEMY OF PATHOLOGY  
- INDIAN DIVISION**

**PROPOSAL FOR ASSOCIATE MEMBERSHIP**

For Office use only

Membership No: IAPID / \_\_\_\_\_ / \_\_\_\_\_

Recd. Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Accepted Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Please attach latest color  
passport size photograph

**Name** (First Name) \_\_\_\_\_  
(Block Letters) (Middle Name) \_\_\_\_\_  
(Surname) \_\_\_\_\_

**Date of Birth** \_\_\_\_ / \_\_\_\_ / \_\_\_\_ **Place of Birth** \_\_\_\_\_ **Gender (M/F)** \_\_\_\_\_

**Address** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**City** \_\_\_\_\_ **PIN** \_\_\_\_\_

**State** \_\_\_\_\_

**Tel.** \_\_\_\_\_

**Mob** \_\_\_\_\_

**Email** \_\_\_\_\_

**Academic Qualifications, graduation**

S.No.	Degree	Year of Qualification	Institute/ University

**PG Students (provide following details)**

Course (MD, DNB etc)	Institute	Year of PG ship

Documents to be attached:

- Copy of MBBS degree certificate
- Letter from HOD / PG Guide attesting to applicant being PG student
- Xerox of Photo identity (like College photo ID card, any other valid photo identity)

Signature of the Applicant

**NOMINATION**

As a member of the International Academy of Pathology, I nominate and support this applicant who has met all the requirements for Associate membership in the International Academy of Pathology. The applicant is interested in all the objectives of the Academy including advancement of teaching and research in Pathology.

	Name & Place	IAP-ID Membership No.	Signature
Proposed by			
Seconded By			

**Payment Details**

**Associate Membership Fee:**

Annual Fee: Rs. 250 [ Cheque: Rs. 325]

Five Year Membership Fee: Rs. 2000 [ Cheque: Rs. 2075]

Please send the membership fee by Demand Draft / Cheque drawn in favour of  
**"SECRETARY & TREASURER, IAP- INDIAN DIVISION"** payable at **"MUMBAI"**.

Mail the duly filled forms along with required attachments and Demand Draft to:

**Dr. ANITA S. BHADURI**  
Consultant Histopathologist  
Department of Histopathology  
P. D. Hinduja Hospital & MRC  
Mahim, Mumbai 400016, M.H.

**Demand Draft Details**

DD. No: \_\_\_\_\_

Date: \_\_\_\_\_

Bank: \_\_\_\_\_  
Branch: \_\_\_\_\_

*Associate memberships are governed by the rules of the International Academy of Pathology (IAP) and the IAP – Indian Division. Associate members do not have voting rights and other statutory rights of full members and will strive to become full members of IAP-ID on attaining their Post Graduate qualification.*