

## **AFMC QUIZ AWARD**

This award was instituted by the Organizing Secretary of 33rd ACBICON 2006, Pune, Col. Parduman Singh by giving a sum of Rs. 2,00,000 from the savings of the conference. The money shall be deposited in Fixed Deposit by Head Office and out of annual interest accrued, 70% shall be used for giving award and 30% shall be reinvested in fixed deposit to take care of inflation and varying interest rates.

There shall be **two awards each year** based on QUIZ contest held during conference. Col. Singh has further donated a sum of Rs. 5000.0 for preparation of a RUNNING TROPHY which shall be given to one who scores highest marks in the contest. He / she shall return the trophy to the next Organizing Secretary before next annual conference is held. This quiz is open to all young Clinical Biochemists and Post-graduates students in Biochemistry/ Clinical Biochemistry in Medical institutions whose age on 31st December of the year shall be **below 40 years**. Those desirous of taking part in this competition should give their name to the organizing secretary

**Terms:** 2 awards each year (1<sup>st</sup> & 2<sup>nd</sup>) based on QUIZ contest

In case of large number of entries, a short first preliminary elimination round of 10 minutes duration will be conducted. Final Quiz for 1 hour will have different questionnaire rounds in the various subjects covering pure biochemistry, clinical, immunology, molecular, genetics, applied biochemistry, pictorials and Recent IJCB journal articles.

**Single Team** includes 1 or 2 applicants of same institute/workplace.

**Last Date to apply:** 3<sup>rd</sup> Sep 2018

**Age:** age on 31st December of the year shall be **below 40 years** for all applicants

**Apply To:** [acbicon18@gmail.com](mailto:acbicon18@gmail.com)

**Application for AFMC QUIZ Award, ACBICON 2018 GOA**

To

The Organizing Secretary

45th ACBICON 2018 GOA

Sir, I/We ..... wish to participate in the AFMC Quiz competition I am aware of the terms and conditions of competing for the award and abide by the rules.

**Enclosures (copy of):**

**1. ACBI membership number & documentary evidence of membership.**

**3. Age Proof:** age on 31st December of the year shall be below 40 years

Name

.....

College/Institute/Hospital/Address.....

.....

Contact Numbers:.....Email Id:.....

Date

Name Signature and Address

Apply To: [acbicon18@gmail.com](mailto:acbicon18@gmail.com)