

PROFORMA FOR SCRUTINY AND APPROVAL OF PUBLICATIONS

NAME

POST APPLIED FOR

Department

Mention only original research articles/papers(No case reports/case series etc) [To fill columns 1 to 5]

S. NO.	PUBLICATION TITLE & JOURNAL DETAIL	AUTHOR NUMBER FIRST / SECOND	INDEXED IN (AS PER MCI NORMS*)	JOURNAL TYPE NATIONAL / INTERNATIONAL	APPROVAL AS PER MCI NORMS* /COMMENTS OF SUBJECT EXPERT	APPROVAL AS PER MCI NORMS/COMMENTS OF SCRUTINY COMMITTEE
1	2	3	4	5	6	7

*** 1. SCOPUS , 2. PUB MED, 3. MEDLINE, 4. EMBASE/ EXCERPTA MEDICA, 5. INDEX MEDICUS, 6. INDEX COPERNICUS**

SIGNATURE OF CANDIDATE	SIGNATURE OF SUBJECT EXPERT	SIGNATURE OF SCRUTINY COMMITTEE
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