**Inviting Nominations for Orations & Symposia**

**(Last Date 15-01-2025)**

1. **Please Send proposal for ORATOR for KSCASICON 2027**
2. Dr. H S Bhat Oration (2027) 2. Dr. Narasanagi Oration (2027)

3. Dr. A J Narendran Oration (2027) 4. Dr. M P Pai Oration (2027)

1. **Please Send Proposal for CONVENER of SYMPOSIUM For KSCASICON 2026**
2. Dr. R B Patil Symposium 2. Dr. Balakrishna Rao Symposium
3. **Please send proposal for Nomination of SPEAKER FOR Dr. S.R. KAULGUD ENDOWMENT LECTURE for KSCASICON 2026**

Kindly Send the Filled form to Hon. Secretary (Scanned copy can also to send to the Email)

Dear Sir/Madam,

I am a member of ASI, and Would Like to give the Oration / Be the Convener / be the Speaker I, or Nominate Dr. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ as Orator/ Moderator / Speaker for the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Oration/ Symposium / Endowment lecture for the year\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 I am attaching a Profile of Mine, His/ Her CV For your Consideration. The Proposed Orator / Convener has not given and Oration / Convened a Symposium in the last 3 Years.

Thanking You,

Yours Sincerely

(Signature of Proposer) (Signature of ASI member)

ASI NO:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ASI NO:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Id : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Id : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile No : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*\*\*\*\*\* PROPOSED ORATOR/ CONVENER DETAILS\*\*\*\*\*\*\***

PROPOSED ORATOR / MODERATOR/ SPEAKER DETAILS:

**ORATION / SYMPOSIUM / S.R. KAULGUD ENDOWMENT LECTURE**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ASI No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile No:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please Note: Curriculum Vitae / Bio-Data of Orator / Convener to be attached with this Form.

Please visit <https://www.kscasi.com/Home/Orations> for More Information.

**Correspondence:**

**Dr. Chandrashekar N**

**Hon. Secretary KSCASI,**

Professor & HOD, Dept. of Surgery,

Siddaganga Medical College, B H Road,

Near Shivkumarswamiji Circle, Tumkur. 572101

Email: Secretarykscasi@gmail.com Mob: 9448009722