



AGOI–YGOG MIS TRAINING PROGRAM 2026

APPLICATION FORM

Hands-on Laparoscopic Wet Lab Training (AGOI - J&J Initiative)



SECTION 1: BASIC DETAILS

1. Name: _____
2. Age: _____
3. Gender: Male Female
4. Designation: Consultant Senior Resident Fellow Assistant Professor
 Associate Professor Professor Other (Specify) _____
5. Institute/Hospital Name: _____
6. City & State: _____
7. Mobile Number: _____
8. Email ID: _____



SECTION 2: PROFESSIONAL DETAILS

1. AGOI Membership Number: _____
2. Zone:
 - North: Himachal Pradesh, Uttarakhand, Punjab, Haryana, Rajasthan, Uttar Pradesh, Delhi, Chandigarh, Jammu-Kashmir and Ladakh
 - South: Andra Pradesh, Telangana, Karnataka, Kerala, Tamil-Nadu, Puducherry, Lakshadweep
 - East: West Bengal, Bihar, Jharkhand, Odisha, Chattisgarh, Arunachal-Pradesh, Assam, Manipur, Meghalaya, Mizoram, Nagaland, Tripura, Sikkim, Andaman
 - West: Gujarat, Madhya Pradesh, Maharashtra, Goa, Dadra and Nagar Haveli, Daman and Diu



SECTION 3: MIS EXPERIENCE

1. Experience in Laparoscopy (Self-assesment)
 - Beginner
 - Basic (Performing Diagnostic procedure)
 - Intermediate (Simple Gynec Surgeries)
 - Advanced (Malignant cases e.g CA endometrium, Lymphnode dissection, complex endometriosis)
2. Approximate number of laparoscopic cases performed
 - <20
 - 20–50
 - 50–100
 - >100
3. Do you perform laparoscopic gynecologic oncology procedures?
 - Yes
 - No
 - Planning to start



SECTION 5: KINDLY ATTACHED THE FOLLOWING DOCUMENTS

1. Short CV (Max 2 pages) PDF
2. Certificate (M.Ch/ DrNB/Fellowship/ Gynec Onco experience)
3. Photograph



DECLARATION

I confirm that the above information is correct. I agree to attend the full training if selected and commit to utilizing MIS skills in my clinical practice.

Date: _____ Place: _____

Signature: _____