

Clinical Research Fellowship - 2024

Nomination NO	2024/CRF-2
Award	CLINICAL RESEARCH FELLOWSHIP 2024 FOR YOUNG CLINICAL RESEACHERS
Award Type	Clinical Research Fellowship
Name	ABANTI DAS
Date of Birth	1987/10/25
Email	das_abanti@yahoo.co.in
Mobile No	9968195459
Designation & Office Address	ASSOCIATE PROFESSOR DEPARTMENT OF RADIOLOGY ROOM NO G048 GROUND FLOOR IPD BLOCK AIIMS KALYANI NADIA WEST BENGAL-741245
Residence Address	FLAT NO 102, TYPE 5 QUARTER AIIMS KALYANI BASANTAPUR SAGUNA NADIA WEST BENGAL-741245
Citizenship	Indian
Name of the Nominator	PROF (DR). RAMJI SINGH
Nominator Email	ED@aiimskalyani.edu.in
Nominator Phone	9472279868
Nominator Designation	EXECUTIVE DIRECTOR AIIMS KALYANI
Nominator Address	ADMINISTRATIVE BLOCK FIRST FLOOR AIIMS KALYANI NADIA WEST BENGAL-741245

Justification for Sponsoring the Nomination duly signed by the Nominator (not to exceed 400 words)

JUSTIFICATION LETTER_0001_compressed.pdf

Complete Bio-data of the Applicant (Max: 1.5 MB)

CV ABANTI DAS UPDATED (2).pdf

First Employment:

Name of institution and location

Year of
joining:

[VARDHAMAN MAHAVIR MEDICAL COLLEGE AND SAFDARJUNG HOSPITAL
NEW DELHI](#)

[2018](#)

Designation/post

[ASSISTANT PROFESSOR , DEPARTMENT OF RADIOLOGY](#)

First medical degree obtained:

Name of degree:

[MBBS](#)

Year of award of degree:

[2010](#)

Institution awarding the degree:

[AIIMS NEW DELHI](#)

Marksheet:

[MARKSHEET MERGED.pdf](#)

Highest medical degree obtained:

Name of degree:

[THORACIC RADIOLOGY FELLOWSHIP](#)

Year of award of degree:

[2018](#)

Institution awarding the degree:

[AIIMS NEW DELHI](#)

Marksheet:

[FELLOW CERTIFICATE.pdf](#)

Research Experience (including, summer research, hands-on research workshop, etc.)

[Research Experience.pdf](#)

Research publications, if any, with complete details (title, journal name, volume number, pages, year, and/or other relevant information)

[Research Publications.pdf](#)

Awards and Recognitions (such as, Young Scientist Award of a science or a medical academy or a national association of the applicant's specialty)

[Awards and Recognitions.pdf](#)

Name of the institution in which research work on the Sun Pharma Science Foundation Clinical Research Fellowship will be carried out, if awarded:

All India Institute of Medical Sciences, Kalyani, Nadia West Bengal -741245

If awarded, supervisor under whom research work on the Sun Pharma Science Foundation Clinical Research Fellowship will be carried out: (a) Name of supervisor, (b) Institution, (c) Department:

Name of supervisor:

PROF. (DR) AJAY MALLIK

Department:

ENT

Institution:

AIIMS KALYANI

Description of research to be carried out if the Sun Pharma Science Foundation Clinical Research Fellowship is awarded (2 pages), comprising the following sections: (a) Introduction, (b) Objectives, (c) Brief description of pilot data, if available, (d) Methodology, (e) Anticipated outcomes, (f) Timelines

DESCRIPTION OF RESEARCH.pdf