



# 6-DAY CME PROGRAM FOR SHALAKYA TANTRA TEACHERS

15<sup>TH</sup> September to 20<sup>TH</sup> September 2025

Co-ordinated by: Rashtriya Ayurveda Vidyapeeth, New Delhi Sponsored by: Ministry of AYUSH, Govt. of India, New Delhi

Organized by: PG Department of Shalakya Tantra, Institute for Ayurved Studies and Research,

SKAU, Kurukshetra-136118



Patron: Prof. Vaidya Kartar Singh Dhiman, Vice Chancellor, SKAU

अरुप विश्वविद्या

**Mentor:** Prof. Dr. Ashish Mehta, Principal, IAS&R,

SKAU, Kurukshetra

**Organizing Secretary:** 

Prof. Dr Ashu, Chairperson

Convenor: Prof. Dr Manoj

Kumar

**Co-ordinator:** Dr. Prerna, Assistant Prof. R & I SKAU.

## **DETAILS OF CME**

Name of the CME	6 days CME programme for Teachers of Shalakya Tantra		
Duration	15 <sup>th</sup> -20 <sup>th</sup> September 2025 (6 days)		
Venue	IAS&R, Shri Krishna AYUSH University, Kurukshetra		
Eligibility of Trainees	<ul> <li>Teaching Faculty of Shalakya Tantra working in any NCISM recognized Ayurveda College.</li> <li>Teachers who have already attended 2 CME programs in the financial year 2025-26 will not be eligible.</li> <li>Eligibility will be as per the RAV norms.</li> </ul>		
Maximum no. of trainees	30 (Thirty)		
Procedure to Apply	<ul> <li>Eligible teachers can apply by filling the google form (https://forms.gle/bDV5ZrPkhb7EfkVz8).</li> <li>Applicants have to scan the filled, signed, recommended application form and submit (in PDF) using the link https://forms.gle/bDV5ZrPkhb7EfkVz8)</li> <li>Duly filled application should be countersigned and certified by the Head of the Institution/ Competent authority to the effect that the candidate is a regular teacher in the concerned department and that he/she has not attended more than Two program during financial year 2025-2026.</li> <li>Incomplete applications and applications received after due date (5<sup>th</sup> August 2025) will not be considered.</li> </ul>		
Procedure of Selection	<ul> <li>Guidelines of RAV CME scheme will be applicable.</li> <li>Selected participants will be informed by email at the earliest.</li> <li>Selected candidate must submit Application form along with self-certified copies of Educational Qualification, Aadhaar Card, registration no., first page of bank passbook or cancelled cheque and record of all previously attended CME on first day of CME.</li> </ul>		
Reimbursement of TA	<ul> <li>Actual fare or up to the rail fare of AC2 tier class, whichever is less.</li> <li>Train tickets must be booked from the Windows of Railways or from the IRCTC website.</li> <li>On production of original bills, food bills not exceeding to Rs. 300/- will be paid for the journey period. No food expenses will be paid if the journey is made by Shatabdi/ Rajdhani/ Duronto trains.</li> <li>Payment of TA &amp; journey DA will be made only at the end of the program.</li> <li>Payments will be made directly to the bank account by electronic transfer.</li> <li>Reimbursement of the journey performed by road is permissible for the places which are not connected by rail. The road mileage will be limited to 2 AC rail charges or actual claim, whichever is lower.</li> <li>Please be noted that TATKAL, PREMIUM TATKAL (DYANMIC PRICING) train tickets will not be reimbursed.</li> <li>The payment of TA and food bills shall be made only on production of original tickets.</li> <li>In case of any epidemic out break and lockdown situation the train ticket and its cancellation charges will be borne by the participant him/herself.</li> </ul>		
Lodging and boarding	<ul> <li>The trainees will be provided the best possible lodging and boarding facility within the budget limits of the CME.</li> </ul>		
Attendance and participation certificate	<ul> <li>Full attendance is mandatory for obtaining participation certificate.</li> <li>The certificate will be issued at the end of the CME.</li> </ul>		
Organizing committee	<ul> <li>Patron: Prof. Vaidya Kartar Singh Dhiman, Vice Chancellor, SKAU, Kurukshetra</li> <li>Mentor: Prof. Dr Ashish Mehta, Principal, IAS&amp;R, SKAU, Kurukshetra</li> <li>Organizing Secretary: Prof. Dr Ashu, Chairperson PG department of Shalakya Tantra, IAS&amp;R, SKAU, Kurukshetra.</li> <li>Convenor: Prof. Dr Manoj Kumar, PG department of Shalakya Tantra, IAS&amp;R, SKAU, Kurukshetra. (9996310888)</li> </ul>		

Contact no.: Convenor- 9996310888, Co-ordinator- 9896925048

Coordinator: Dr. Prerna, Assistant Prof. R & I, SKAU. (98969 25048)		
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<u>/iw/viewform?usp=header</u>		
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me.shalakya2025@gmail.com		





#### APPLICATION FORM

#### Six Days CME for Teachers of Shalakya Tantra

Date- 15 to 20 September 2025

Coordinated by: Rashtriya Ayurveda Vidyapeeth, New Delhi Sponsored by: Ministry of AYUSH, Govt of India, New Delhi

Organized by: PG Department of Shalakya Tantra, Institute for Ayurved Studies and Research, Faculty of Ayurved, Shri Krishna AYUSH University

Kurukshetra-136118

UNIVERS

Passport size
Photograph of
recent times,
VERIFIED and
signed by the
Head of the
organization.

### To The Principal

Institute for Ayurved Studies and Research, Faculty of Ayurved, Shri Krishna AYUSH University Kurukshetra.

I hereby apply for 6 days CME for teachers of Shalakya Tantra to be held at your Institute as mentioned in the Notification. My details are as follows-

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1.	Name in full (Block letters)		9.
1.	Name in run (Block letters)		1 2
2.	Father's / Husband's name		i m
3.	Gender		¥ 1 1 1
4.	Age and Date of Birth		
5.	Current Designation & Department		
6.	Educational Qualifications ( Attach Copy )	Name of Degree	Subject
		BAMS	
		MD	
		Any Other	120
7.	Name & Address of the College /Department/		200
	Institution presently working		23
8.	Official address and		189
	Phone number	(3)	
	Residential Address	Out Co	
9.	Mobile No.	वश्वविद्यादः	
10.	Email id		
11.	Date of entry into service		
12.	Total Teaching experience	UG	PG

Contact no.: Convenor- 9996310888, Co-ordinator- 9896925048

13.	NCISM Teacher's Code					
14.	Registration board and Re	eg. No. (attach copy)				
15.	AADHAR No. (attach cop	py)				
16.	Whether you have undergone any CME/ ROTP sponsored by AYUSH Ministry in the last five years? If yes, girthe details given as below:					
S. ROTP/CME Organizi		zing Institute	Dates (From – To)			
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		111511	-45/>.			
		. 1		4.		
17.	Bank Details (Attach a copy of front page of passbook / cancelled cheque):					
	Name of Bank:	LELERE		1 %		
	Branch:			1 5		
	Account no.:					
	IFSC Code:					
	I					
		<u>Unde</u>	<u>rtaking</u>			
"I			undertake that the	information provided by me		
is co	orrect to be best of my know	wledge and I have not cond	cealed any relevant information	n, if the information		
1	•		vill be liable for disciplinary ac	tion (as the case may be)		
and recovery of fund spent against me if any."						
Signature of applicant						
(0.0)						
RECOMMENDATION OF HEAD OF THE INSTITUTION/						
CONTROLLING AUTHORITY						
The application for <b>Shalakya Tantra</b> CME of						
Dr is forwarded for consideration						

Date:	Signature of Head of the Institution/
Place:	Controlling Authority along with seal.

Note: Application will not be considered if

- 1. If the information given above is incomplete in any aspect.
- 2. If not recommended by the Head of the Institute.
- 3. Selected candidate must submit Application form along with self-certified copies of Educational Qualification, Aadhaar Card, registration no., first page of bank passbook or cancelled cheque and record of all previously attended CME on first day of CME.

