



Critical Care Education Foundation

F- Gemini Park, Mankhurd, V.N. Purav Marg, Mumbai-400 088

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Application for EXAMINERSHIP of the College of Critical Care Medicine

Date: _____

To the Dean,
College of Critical Care Medicine

I would like to apply for **Examinership** of the College of Critical Care Medicine and I Fulfil/will fulfil the Criteria for Teachership if provisionally approved.

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|-----------|--|--|--|
| A. | Eligibility for becoming an Examiner for the FCCCM examination: | | |
| | | I have passed the FCCCM exam. I will Observe 2 FCCCM exams as Observer | |
| | | I have not passed the FCCCM but spend > 50% of my professional time in Critical Care. If provisionally selected I will fulfil the below requirements: | |
| | | | Attend the 4-day Orientation Course for FCCCM when next held. |
| | | | Attending 2 FCCCM exam as an observer examiner when next held. |
| | | | I have > 5 years of ICU Experience |
| B. | Eligibility for becoming an Examiner for the AFIC examination: | | |
| | | I have passed the AFIC exam. I will Observe 2 FCCCM exams as Observer. | |
| | | I have not passed the AFIC exam but spend > 50% of my professional time in Critical Care. I have > 8 years ICU experience. I will fulfil the below requirements: | |
| | | | Attend the 4-day Orientation Course for FCCCM when next held. |
| | | | Attend the 4-day Orientation Course for AFIC when next held. |
| | | | Attending 2 AFIC exam as an observer examiner when next held. |

I am providing my details for your reference.

1. Name: _____
2. CCM membership Number: _____
3. Hospital affiliation: _____
4. City: _____ State: _____
5. Mobile number: _____ Email: _____
6. Areas of special interest in Critical Care: _____

Attachments:

1. Medical degree & Medical Registration with highest qualification (pdf format).
2. Critical Care Experience certificate (self) and any examination passed (pdf format)
3. Photograph (Passport size) scanned and sent with application (JPG or PNG format) Email

copy to office@ccef.in with cc to chairman@ccef.in