

**APPLICATION FOR ORGANISING DR K.T. DHOLAKIA CME  
OF THE INDIAN ORTHOPAEDIC ASSOCIATION.**

**during IOACON 2026**

**(Fourth Zone- IV): Uttar Pradesh, Madhya Pradesh, Bihar & Chattisgarh.**

I. Name of State Chapter:

II. Name of President of State Chapter

III. Name of Secretary of State Chapter

IV. Name of Nominated Coordinator/Convenor of CME

VII. Has the proposal been discussed & passed in the state chapter:

(Kindly attach the approval letter signed by President & Secretary of host State chapter )

**Dated:**

**Signatures:**

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(President State Chapter of I.O.A.)

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(Secretary State Chapter of I.O.A.)

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(Nominated Coordinator/Convenor for CME- 2026)

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