



Continuing Medical Education Programme (C.M.E.) for Unani Medical Officers

16th - 21st November , 2026

Sponsored by:

Ministry of AYUSH, Government of India, New Delhi

Organized by:

Hakeem Syed Zia ul Hasan Govt. Unani Medical College & Hospital

AYUSH Campus, Nehru Nagar-Kolar Bypass Road, Bhopal (MP)



E-mail: cmegumc2022@gmail.com

Website: www.gumcbhopal.in

Dear Doctors,

It gives us immense pleasure to inform that Hakim Syed Ziaul Hasan Government Unani Medical College, Bhopal (M.P.) is going to organize 6 days Continuing Medical Education (CME) Programme for Unani medical officers in an attempt to upgrade their knowledge and skills. This programme will be held from **16th – 21st November, 2026** by the sponsorship of Ministry of AYUSH, Govt. of India, New Delhi and under the patronage of Directorate of AYUSH, Govt. of Madhya Pradesh.

This scheduled programme will include expert lectures as well as hands on training sessions on different important clinical aspects by the eminent experts of the field and the CME is being held with a view to provide a platform to discuss various clinical issues that arise in routine medical practice. We sincerely hope and expect that this CME will greatly be beneficial for the participants in their day to day clinical practice. We heartily invite you to be part of this academic/clinical programme and look forward to your active participation.

Since the number of trainees is limited, please send the duly filled and forwarded application forms as a scanned copy earliest on the official email Id: cmegumc2022@gmail.com. Last date for receiving the complete forms is **07th October, 2026**.

We are looking forward to seeing and hosting you here.

Prof. Mehmooda Begum
Principal & Organizing chaiperson

Chief Patron
Shri Shobhit Jain (I.A.S.)
Principal Secretary, Department of AYUSH,
Govt. of Madhya Pradesh

Patron
Smt. R. Umamaheswari (I.A.S.)
Commissioner, Directorate of AYUSH,
Govt. of Madhya Pradesh

Organizing Committee

Co-Organizing Chairman
Dr. Dilshad Ali
Mob. No 8319768281

Organizing Secretary
Dr. Mohd. Naseem Khan
Mob. No. 9340963619, 7898121650

Co-organizing Secretary
Dr. Ehsan Ahmad
Mob. No. 7354898786

Co-organizing Secretary
Dr. Syed Mohd. Abbas Zaidi
Mob. No. 7879196740

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REGISTRATION FORM

Name of Applicant:	Self attested Photograph
Designation:State Registration No.	
Name of Hospital/Dispensary :	
..... State	
Total Experience:	
Address for Communication:	
.....	
..... Email Id.....	
Mobile No. AADHARNo.:	
Bank Account No.....Name as per Bank A/c.....	
IFSC CodeBank Name & Branch.....	
No. of CME attended in year 2026 (Please give details)	
.....	

Signature of Applicant

Name & Designation of forwarding authority

Remark:

Signature of Forwarding Authority

(Seal)

INSTRUCTIONS:

1. The registration form should be forwarded by Director/CMHO/DAO/BMO /other competent authority.
2. Keeping in view of limited seats applicants will be selected on first come first serve basis and other AYUSH Guidelines.
3. Participants will be required to furnish a copy of their Aadhar Card and Registration Certification from the respective Medical Board on their arrival.
4. **Scanned copy of duly filled and forwarded registration form may be sent to organizing chairman through E-mail at cmegumc2022@gmail.com latest by 07th October 2026 and bring the forwarded original registration form (Hard Copy) at the time of event.**
5. Additionally, applicants must also furnish the required details in the given Google form link (<https://forms.gle/DR83NihauWXBmK3A7>)

Note:

1. No amount will be paid to the trainees except reimbursement of travelling expenses. TA will be paid up to AC-II class train fare/AC-Bus to the trainees subject to providing of original tickets. However, boarding and lodging will be provided by the organizer as per the AYUSH guidelines.
2. Incomplete registration form or forms not forwarded by the competent authority will not be entertained for screening.

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UNDERTAKING

"I,.....(Name and Designation)

from.....Hospital/Dispensary

.....
undertake that the information provided by me is correct to the best of my knowledge and I have not concealed any relevant information. If the information provided by me is found false/inaccurate at any stage, I will be liable for disciplinary action (as the case may be) and recovery of fund spent against me if any."

Signature of Applicant