अखिल भारतीय आयुर्विज्ञान संस्थान (समन्वय प्रकोष्ठ)

फा.सं.35-2/2018-समन्वय प्रकोष्ठ-स्था.-I

दिनांक: 08.01.2019

परिपत्र

विषय: Check list for Hon'ble HFM -reg.

कृपया उपर्युक्त विषयक स्वास्थ्य एवं परिवार कल्याण मंत्रालय से प्राप्त ई-मेल दिनांकित 23.12.2019 के साथ संलग्ति Checklist एतद्वारा, सूचना एवं आवश्यक कार्रवाई हेतु प्रेषित की जाती है।

संलग्नक अधोपरि।

७ २८ २१ल २००१ वर्ग (एस.एल.चमोली)

प्रशासनिक अधिकारी

वितरण:

- (1) सभी केन्द्र प्रमुखगण।
- (2) सभी विभागाध्यक्षगण।
- (3) सभी भण्डार अधिकारीगण
- (4) सभी प्रशासन अधिकारीगण।

प्रतिलिपि:

- निदेशक महोदय के प्रधान निजी सचिव।
- > उप-निदेशक (प्रशासन) महोदय के निजी सचिव।
- उप-सचिव महोदय के वैयक्तिक सहायक।
- प्रोफेसर इन चार्ज (मीडिया और प्रोटोकॉल)
- कंप्यूटर सुविधा- कृपया इसे एम्स की वेबसाइट पर अपलोड कराने तथा ई-मेल द्वारा सभी संबंधित व्यक्तियों को भेजने की कृपा करें।



5.No. 437 Date 30/12/10/5

Checklist for Hon'ble HFM

1 message

Manish Pandey <manishsppanday@gmail.com>
To: director.aiims@gmail.com

Mon, Dec 23, 2019 at 4:32 PM

Sir,

As discussed, please find attached checklist for your ready reference.

Kind Regards, Manish Pandey O/o Union Heath and Family Welfare Minister

Ministry of Health & Family Welfare Government of India, Room No. 353 A, Nirman Bhawan, New Delhi -11

Tel - 23063024/3513 Fax- 23062358 M - 9711146341 धारत किया/RECEIVED । निधेशक (प्रशा.) कार्यालय, अभा आ सं., Director (Admn.) Office, A.L.I.M.S.

24 DEC 2019



प्राप्त किया/RECEIVED उप-सचिव कार्यालय, अ.भा.आ.सं. OFFICE OF THE DY SECRETARY, A.I.I.M.S.

डायरी सं./Dy. No.:....

Checklist for Hon'ble HFM_Blank.doc

Pls. Circulatito all,
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To duding medical proposa.

26/12

De zulinge 20/1/2019

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Checklist for the information to be furnished

SI. No.	Detailed item		Information required	Details (To be furnished separately as Annexure wherever required)
1.	Function	1.1	About function	
		= 3		
		1.2	Theme	A
		1.3	Expectations from Hon'ble Minister for participation in the programme and outcomes expected	
		1.4	Is it an inauguration/ dedication / any other – Details thereof. Date and Time of the Function	
	L	1		
2.	Participants	2.1	Expected Number	
		2.2	Profile of participants likely to come in the function	
		2.3	The expectations of the participants from the function	
3.	Organisers	3.1	Background and brief profile of the organization conducting the function and past experience in such organization	
**		3.2	Name, contact numbers and Emails of members of organization committee	
2		3.3	Name, contact numbers and Emails of one or maximum two Officers/ persons who will liaise with HFM office for the function	
4.	Venue	4.1	Hotel / Hall / Outdoor / other arrangement?	
		4.2	Dais seating plan (as per protocol)	<u>.</u>

6. Si (a	Reception Stay at Venue) Photography and Videography	 4.4 Hall arrangements 4.5 Tea and refreshments, if any 5.1 Where? 5.2 Who will receive? His name and contact number 5.3 Route plan from reception to the function venue 6.1 Arrangement for short stay at venue 7.1 Name and Contact no. of the Coordinator Appropriate arrangements for photography and videography may be made and a Coordinator be deputed for acting as a single
6. Si (a	Stay at Venue) Photography	5.1 Where? 5.2 Who will receive? His name and contact number 5.3 Route plan from reception to the function venue 6.1 Arrangement for short stay at venue 7.1 Name and Contact no. of the Coordinator • Appropriate arrangements for photography and videography may be made and a Coordinator
6. Si (a	Stay at Venue) Photography	5.2 Who will receive? His name and contact number 5.3 Route plan from reception to the function venue 6.1 Arrangement for short stay at venue 7.1 Name and Contact no. of the Coordinator • Appropriate arrangements for photography and videography may be made and a Coordinator
7. P	hotography	His name and contact number 5.3 Route plan from reception to the function venue 6.1 Arrangement for short stay at venue 7.1 Name and Contact no. of the Coordinator • Appropriate arrangements for photography and videography may be made and a Coordinator
7. P	hotography	function venue 6.1 Arrangement for short stay at venue 7.1 Name and Contact no. of the Coordinator • Appropriate arrangements for photography and videography may be made and a Coordinator
7. P	hotography	7.1 Name and Contact no. of the Coordinator • Appropriate arrangements for photography and videography may be made and a Coordinator
ar	nd	Coordinator • Appropriate arrangements for photography and videography may be made and a Coordinator
		point contact for transmitting photos and videos of Hon. HFM's programmes. • All the photos and videos after each programme may be sent (at-least 3 times a day) to the following email IDs: • hfwminister@gov.in • hfwminister@gov.in • abhinav.gupta@gov.in • sadanand.ranjan@gmail.com • agam.mittal@gov.in • pibhealth@gmail.com •

	Plan (Bilingual)	9.2 Twitter/Facebook content for the	
	7 1	Social Media Handles of the Minister.	
		9.3 Twitter/Facebook content for the	
		Social Media Handles of the Ministry.	
			·
10.	Media	10.1 Which all media people are	
	Arrangements	Invited?	
		10.2 DD, ANI, PTI	
		10.2 00,7111,111	
		10.3 Arrangements where the media	14
= 10		interaction is planned	a = 1
		mitoraciion io planifea	
		10.4 Any unplanned media interaction	2
44	Accommodation	11.1 Details of Hotel Suite for Hon.	
11.	Accommodation	Minister and PS to HFM in case	<i>!</i> *
		of planned stay.	
40	I have idention in	40.4 Invitation to Hon LICM	
12.	Invitation	12.1 Invitation to Hon. HFM	
		12.2 State the name of dignitaries	,
		invited in the Programme: a. Chief Minister	
		b. Health Minister	
		c. State Minister	
		d. Local MP (LS or RS)	= v
		e. Local MLA	*
		f. Any other dignitary	
		1. Arry other dignitary	W
13.	Advertisement/	State the name of dignitaries whose	
	Backdrop/	name are included in Advertisement/	
	Plaque	Backdrop/ Plaque:	
	•	a. Chief Minister	
		b. Health Minister	¥
	445	c. State Minister	
		d. Local MP (LS or RS)	
	-	e. Local MLA	
	41	f. Any other dignitary	
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