

APPLICATION FORMAT

Attested
Photograph

1. Name of the Post : **Part-time Medical Officer (Allopathic) on contract basis**
2. Full Name (in Capital Letters) : _____
3. Father's Name : _____
4. Age & Date of Birth : Age _____ Date of Birth _____
5. Address for Correspondence : _____

 _____ PIN _____
6. Permanent Address : _____

 _____ PIN _____
7. Sex : Male () Female ()
8. Contact details. : Landline: _____
 Mobile: _____
 Email: _____

9. Educational Qualification :

Level	Year of passing	Division/Grade	University	Subject Specialization
MBBS				
M.D.				

(Please attach certified copies of degrees)

10. Details of Employment in chronological order :

Name of the Office	Post held	Ad-hoc/ Temp/ Regular/ Pmt	Exact dates to be given		Total period (in years)	Scale of Pay	Nature of duties
			From	To			

use separate sheet if required. (Please attach proof of experience where available)

11. Date of retirement from the Govt. Service, if applicable: _____
12. Details of present employment (Wherever applicable): _____

Contd....

13. **Details of certified photocopies of certificates are to be enclosed.**

- a) S.S.C. certificate (as proof of age)
- b) A Degree in MBBS, MD or equivalent
- c) Registration Certificate
- d) Copy of any one as proof of identity : Voter ID card / driving licence
Aadhar card / Passport.
- e) Copy of any one as a proof of residence :Water bill/ Telephone bill/
Electricity bill
- f) Two copies of latest passport size photographs
- g) The experience should be mentioned separately in tabular form stating
 - 1) Central / State Govt. Service
 - 2) Govt. Hospitals/ Institutions/ dispensaries,
 - 3) PSUs and
 - 4) Private Sector Hospitals/Institutions/Charitable Dispensaries etc.
- h) Two references

I hereby declare that all the statements made in this application are true and complete to the best of my knowledge and belief. I understand that action can be taken against me by the concerned authorities if I am declared by them to be guilty of any type of misconduct mentioned herein.

Signature of the candidate

Name: _____

Dated:

Place: