

APPLICATION FORMAT

1. **Post applied for** :
2. **Name** (in Block Letters) :
3. **Gender** (Please put a '√') Male Female
4. **Date of birth** :
5. **Category** (Please put a '√')
 General Scheduled Caste
 OBC(non creamy layer) Scheduled Tribe
6. **Name of father and occupation** :
7. **Are you an Ex-serviceman?** Yes No
If yes, please specify years of service and attach certificates Years of service :
8. **Are you a person with disability?** Yes No
If yes, please specify nature and % of disability Nature of Disability : Locomotor / Hearing Impaired
 % of disability :
9. **Nationality** :
10. **Religion** :
11. **Mailing address** with Pin code :
- Telephone No. with STD code :
 Mobile No. :
 E-mail ID :
 Fax No. :



12. **Academic & professional qualifications** (Starting from Matriculation)

| Name of College / Institution | Board / University | Examination passed / Specialisation | Duration of the Course | | Month & Yr. of Passing | % of Marks & Class |
|-------------------------------|--------------------|-------------------------------------|------------------------|----|------------------------|--------------------|
| | | | From | To | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

13. Training Details (Internship, House Surgeon etc.,)

| Name of Institution | Training period | | Field of training |
|---------------------|-----------------|----|-------------------|
| | From | To | |
| | | | |
| | | | |

14. Name of medical council registered with and :
Registration No.

15. Experience Details (start with most recent employment)

| Name of organization and place of posting | Position held | Period of employment | | Pay scale with Basic pay (in case of Govt.Sector) / Gross Salary in case of Pvt. Sector | Nature of experience Specialisation, if any |
|---|---------------|----------------------|----|---|---|
| | | From | To | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

16. Academic achievements and activities

| | |
|---|--|
| Details of research work, publications etc. | |
| Details of Scholarships / Awards /Honours / University Rank | |
| Details of extra curricular activities | |
| Games, Sports and Hobbies | |

17. Place of posting (preference may be given as 1 or 2 : Tiruchirappalli Ranipet

I hereby certify that the information provided above is true and complete the best of my knowledge and belief. If at any time the Company finds that any part of the information given by me in this application form is false, I agree that my appointment shall be liable to summary termination without notice or compensation.

Place:

Date:

(Signature of candidate)