



Format of Application

Candidates are advised to read the detailed advertisement carefully prior to filling the application form. The candidate must ensure that he/she has an active e-mail ID and Mobile number. The e-mail ID and the Mobile number are required to be preserved till publication of final result. The candidate must also ensure the availability of all the relevant documents/ certificates at the time of submitting scanned copy of application form in a single PDF file.

Candidate's Color Photo The photograph of the candidate must contain his/her full face, both

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Sl.	Qualifications	College		Board/ University		ar of sing	Marks Obtaine		Total Marks	Marks in %	Attempts
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1.	Experience (as p	per the post	notified) Govt.	/Pvt. H	lospita	al/Institut	ion (in Years	/ Months	s) with
Sl.	Position held Institution			rom	Т	O	Total	Т	eaching/ Teachir		Nature: Regular/ Contract
1											
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2											
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.3.	NMC/State Me	edical Counc	il/ Dent	al Coun	cil of I	ndia/ S	State Dent	al Co	ouncil		
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17.	Pr	esen	t wor	king	stati	1S:														
		Present working status: (i) Name of the Employer:																		
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21.	De	etails	of Id	entit	y Cei	tifica	ate (02 ou	t of ()3 ar	e rea	uirea	d):							
	Details of Identity Certificate (02 out of 03 are required):(i) Aadhaar No:																			

(ii)	Vo	ter I	1:										
(iii)	PA	N:											
22.	Ic	lentii	ficati	on M	ark:									

DECLARATION:

I undertake that all the above information given above by me is correct to the best of my knowledge and I solemnly affirm that if any information given by me, if found wrong at any stage, my candidature for the post will automatically stand cancelled.

Date: (Signature of Candidate)

Important

(Read before filling forms)

- Incomplete application is liable to be rejected.
- Form should be filled by candidate in person with clear and CAPITAL letters.
- Photograph should be with clearly visible face, both ears & signed across.

XXX

Checklist

Following documents should be submitted at time of application form submission.

Sl.	Name of Documents	Submitted: Yes/ No, If No, Reason?
1	Admit Card/ Certificate of Class 10th for Date of Birth	
2	All Marks Sheets of MBBS	
3	Attempt Certificate of MBBS	
4	Degree Certificate of MBBS	
5	Marks Sheets of MD/MS/DNB	
6	Attempt Certificate of MD/MS/DNB Examination	
7	Degree Certificate of MD/MS/DNB Examination	
8	EWS/OBC/SC/ ST Certificate when applicable	
9	NMC/State Medical Council Registration Certificate	
	(updated)	
10	Aadhaar Card	
11	Proof of Publications, if any	
12	NOC from Current Employer, if applicable	
13	Relieving Certificate from previous Employer, if	
	applicable	
14	Experience Certificate, if applicable	
15	Any other	