APPLICATION FORM FOR THE POST OF SENIOR RESIDENT (NON-ACADEMIC)

Advertisement No.	AIIMS/BBS/Dean/SR/49-A/3393	
Name of the Department		Please attach recent passport size photo

Personal Details (in Block Letters)

1. Full Name		

2. Father's /Husband's Name					

3. Address for Correspondence					

4. Permanent Address					

5. E-mail Id					
(In capital letters)					
6. Phone/Cell No.1					
Phone/Cell No.2					
Land Line No.					

7. Date of Birth (Please attach	D	D	М	М	Y	Y	Y	Y	8. Nationality	
document for evidence)										
									9. Name of the State to which you belong	
10. Gender (Male / Female)										

11. Category	UR	OBC	SC	ST	EWS

12. If Physically Challenged (OPH Category)	
Percentage Disability	

Examination Passed	University/Board/Institution/Council of examination	Month, Year of Passing
Secondary (10 th)		
Senior Secondary(12 th)		
MBBS		
MD/MS/MDS/DNB		
DM/MCh		

Details of work experience:

14. Name of the Organisation					Perio	d of S	ervice						Designation	Nature of Duties	Total Monthly	Reason for leaving
organisation			FO				T	0				performed	Emoluments	Services		
	D	D	М	М	Y	Y	D	D	М	М	Y	Y				

15. Bring the original and 02 sets of attested photocopies of related documents at the time joining.

 16.
 Details of Application Fee: through ______, Transaction No._____

 Date ______ Amount Rs._____.

17. I hereby declare that entries made in this form as above are true and correct to the best of my knowledge and belief. In the event of any information being found false/incorrect my candidature/ services is liable to be terminated without any notice. I ______ agree to abide by the terms and conditions of contractual appointment.

Place:

Date:

Signature of the Candidate