## **ANNEXURE-I**

## APPLICATION FORM FOR ENGAGEMENT OF TEACHING FACULTY ON CONTRACTUAL BASIS IN ESIC MEDICAL COLLEGE, JOKA

1.	(a) Post applied for :	Attach Recent Passport Size Photograph – self attested across the	
	(b) Specialty applied for :		
2.	Particulars of the draft :		lower part of the photograph
	Amount Rs. :		(4 cm x 3 cm)
	Name of issuing bank branch:		
	D.D. No.: Dated:		
3.	Name in full (in block letter):		
4.	Father's/ Husband's Name:		
5.	(a) Date of Birth (in figures):		
	(in words) :		
6.	(a) Religion :		
	(b) Nationality :		
7.	Mailing Address:		
8.	(a) E-Mail :		
	(b) Mobile No.:		
1.	Permanent Address :		
10.	Sex (write 1 for Male, 2 for Female, 3 for Transgender)	:	
11.	(i) Whether Ex-Serviceman	: Yes / No	
	(ii) Whether ESIC/ Govt. Employee	: Yes / No	
12.	Community to which applicant belongs	: [	
	(Write 1 for SC		
	2 for ST		
	3 for OBC		
	4 for General		
	5 for EWS		

(Attach annexure, if necessary)

		Duration		Degree/Exa		Percentage
Name & Address of College	University	From	То	mination Passed	Subjects	of marks obtained

14. DETAILS OF EMPLOYMENT IN (CHRONOLOGICAL ORDER): Teaching experience certificate to be furnished. (Add extra rows if necessary)

Name of the Institute	Position (s) held	Period (	Period of service		Whether Experience
		From	То	Type (Govt. / Pvt.)	recognized by MCI

15. DETAILS OF RESEARCH PUBLICATIONS:

Serial No	Name of the Journal With volume and number	Year of Publication	Title of the Research Paper	First / Second / Other Author

## 16. TRAINING IN M.C.I. RECOGNIZED TEACHERS' TRAINING PROGRAM: (attach supporting documents)

Institution	Period	Name of the Training Program

17. ACADEMIC ATTAINMENTS & ACTIVITIES: (attach supporting documents)							
18. List of Enclosures:							
1.	2.						
3.	4.						
5.	6.						
7.	8.						
9.	10.						
11.	12.						
13.	14.						
15.	16.						
I hereby declare that all the statements made in this application are true, complete and correct to the best of my knowledge and belief.							
I understand that in the event of any information being found false or incorrect at any stage, my candidature / appointment shall be liable to be cancelled / terminated summarily without notice or any compensation in lieu thereof.							
I also confirm that No Objection from the Present Employer for applying this post has been applied for / taken.							
Place:		Signature of the Candidate					
Date:		Signature of the Candidate					