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

Advertisement No.		AIIMS/BBS/Dean/SR/49-A/																	
Name of the Department																Please attach recent passport size photo			
Personal Details (in Block Le	tters)			•															
1. Full Name																			
2. Father's /Husband's Name																			
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3. Address for																			
Correspondence																			
4. Permanent Address																			
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5. E-mail Id																			
(In capital letters)																			
6. Phone/Cell No.1																			
Phone/Cell No.2																			
Land Line No.					1		T		Y	10.		•					1		
7. Date of Birth (Please attach document for evidence)			D	D M M			YYY				Nationality								
								9.1	9. Name of the State to which				you belong						
10. Gender (Male / Female	e) 																		
11. Category				UR		OBC				SC			ST			EWS			

12. If Physically Ch	alleng	ged (Ol	PH Cat	egory)													
Percentage Dis	sability	У															
Examination Pa	ssed				Univer	sity/B	oard/I	nstit	ution,	/Cour	icil o	mination			Month, Year of Passing		
Secondary (10 th)																	
Senior Secondary(12 th)																
MBBS																	
MD/MS/MDS/DNE	3																
DM/MCh																	
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16. Details (Date												_, T	ransaction N	0			
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Place:													6:	4	٠.٠	. Can did i	
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