

APPLICATION FORMAT

Advertisement No.....



Application for the post,at Rajendra Institute of Medical Sciences, Ranchi-09.

1. APPLICANT'S NAME (In block letters) :-----

2. FATHER'S/HUSBAND'S NAME (In block letters):-----

3. DATE OF BIRTH :-----

4. SEX----- 5. NATIONALITY -----

6. RELIGION :----- 7. CATEGORY (Write whether Category out of Gen/ST/S
C/BC-I/BC-II)-----

8. ADDRESS (Including Pin Code No., Mobile No. & Email)

i. CORRESPONDENCE:-----

ii. PERMANENT :-----

9. EDUCATIONAL QUALIFICATIONS (Starting from matriculation) :

S.No.	Examination (s) passed	Name of College/ Institute	Board/University	Yr. of Passing with marks(%)	No. of attempts

10. TEACHING/ WORK EXPERIENCES:

S.No.	Name of Organisation	Post held	From	To	Total duration

11. Publication/Award/Other Achievement.....

12. DECLARATION:

I,.....S/o, W/o.....do hereby declare that all the statements made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect, I hereby convey my consent for cancellation of my candidature.

Place:

Date:

Signature of the Candidate