APPLICATION FOR APPOINTMENT

Application for the post of :		
Name :		
Date of Birth :		
Identity Proof no	Issued By	
(Passport Copy/ Driving Licence/PA	N Card/Voter ID/MCI Sn	nart Card/State Medical Council ID)
PAN Card and my PAN is		/ I am not having PAN Card
Present Designation	Departme	nt
College		·
Nature of Employment (Full Time/ Pa		
Whether Belongs to: SC/ST/OBC/Ex-s	service/other	
Residential Address:		
Contact No.:		
Address Proof :		

(Copy of Passport/Voter ID/Ration card/Electricity Bill/Driving License)

QUALIFICATION

Qualification	College	University	Year	Registration No. of UG & PG with date	Name of the State Medical Council
MBBS					
MD/MS					
DM / M.Ch.					
Other					

PREVIOUS TEACHING EXPERIENCE

Designation	Department	Name of institution	From	То	Total Experience in years & months
Tutor /					
Demonstrator					
Registrar /					
S. Resident /					
J. Resident					
Assistant					
Professor					
Associate					
Professor					
Professor					

To be filled by Ex Army Personnel only:

S.No.	Place of	Designation	Period		Remark
	Posting		From	То	
1					
2					
3					
4					
5					

Number of Research Publications in Journals during the last 3 (three) academic years.

A)	International Journals :
B)	National Journals :
C)	State / Other Journals :

Please sent the scan copy of the following documents on the Email ID of the college and bring the original documents as well as photocopy at the time of interview.

S.NO.	Documents
1	Recent Passport Photographs
2	Photo ID Proof issued by Government of Authority
3	Certificate copy of Residence Proof
4	Copy of Degree MBBS & PG
5	Copy of Registration MBBS & PG
6	Copy of Experience from all teaching appointments held before the date of application
7	Relieving order from previous institute
8	PAN Card
9	Form NO. 16(TDS Certificate) for the financial year 2009-10