

Recent Passport size photograph

APPLICATION FORMAT

1. Post Applied for (in Bloc	K Letters) :		
2. Name in full (In Block lette	ers) :		
3. Father's Name :			
4. Date of Birth :			
5. Community :(SC/ ST/OBC(NCL)/EWS/ U	Un-Reserved). (Ple	ease attach certificate)	
6. Correspondence Address (In Block letters)	:		
			<u>-</u>
_			
(In Block letters)			
8. Contact No; Mobile	:		
Telephone	: (O)	(R)	
Fax	:	E-mail	
9. Nationality :			
10. Martial Status : (Single /Married / Wido	 ow/ Divorcee)		
11. If Married, Occupation	,		



	Year of passing	Name of the Inst/University	Max marks	Marks obtained	% of marks
* In case CGP	A/grade/grade point :	are awarded instead	d of marks, a certifi	cate from the Registr	ar of the University/k
				ent percentage and r	
** If any candid	date has obtained red	quired eligible qualif	ication from a Fore	ign University/Institut	e, copy of certificate
passing qualify	ring examination fron	n National Medical (Council (Formerly N	MCI) is to be attached	l along with applicati
Medical Qualifi	cation Details:				
Medical Degre	ee/PG Degree/ PG		Certificate No.: (Issu	ed Date of Issue	
Diploma		by NMC / Stat	e Council)		
		İ			
.Internship / Ro	tational training detai	ls:			
•	tational training detai		ning / Internehin	Name and Pla	co of Instituto / Hosp
Date of Comple Compulsory Ro	tational training detai etion of one year otational Training /		ning / Internship	Name and Place	ce of Institute / Hosp
Date of Comple Compulsory Ro	etion of one year		ning / Internship	Name and Place	ce of Institute / Hosp
Date of Comple Compulsory Ro	etion of one year		ning / Internship	Name and Place	ce of Institute / Hosp
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Date of Comple Compulsory Ro	etion of one year		ning / Internship	Name and Place	ce of Institute / Hosp
Date of Comple Compulsory Ro Internship	etion of one year	Period of Trai	ning / Internship	Name and Place	ce of Institute / Hosp
Date of Comple Compulsory Ro Internship	etion of one year otational Training /	Period of Trai	ning / Internship	Name and Place	ce of Institute / Hosp



17. Exp	perience Details (Pos	t qualification only) (P	lease attach sepa	ırate sheet if	required)	
Sr.No.	Name & address of employer	Post held	From	То	Pay scale & gross emoluments	Nature of experience (attach separate sheet if required)
19. Ha a. F b. I	ails of Computer prof we you applied earlie Post applied for Month & Year whether attended inte	er in OPGC during last to	wo years : Yes / No	No If yes,	_	
If y	ve you worked earlie es, please specify, p st post held:	eriod Fromto_	res/No			
	you have any relatives, please specify, N	e working with OPGC: \ ame & Designation :	Yes/No			
		OPGC under / with who GC employee under / wi				Yes/No n :
lf Y Nar Sta	es, Case No. & Date me of Court: itus of Case:	Have you ever been are: which arrested/prosecu	·	ed, convicte	d by a Court of Law? Yo	es/ No



24. Achievement, if any : :	
25. Other relevant information, if any :	
26. List of Enclosures (Please mark (□)	
i. 10 th certificate ii. 12 th certificate iii. Degree certificate + mark sheet iv. Professional qualification certificate(s) + mark sheet v. Proof of experience vi. Salary certificate viii. Caste certificate ix. Any other	
Verification	
I declare that the information furnished above by me is true to the best of my knowledge and belief a material has been concealed.	nd that nothing
Signature of	of the Candidate
: Date	