

Dr Swagata Tripathy (Contact Information)

Additional professor

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(Principal investigator)

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Application form:

1. Name of the post applied for:

2. Name of the project:

3. Name in full (block letters):

4. Mothers name:

Fathers/husbands name:

Guardian name and Phone no.:

5. Address for correspondence :

Photograph

With phone number & email id.

6. Permanent address:

7. Date of birth:

8. Whether SC/ST/OBC/General:

Caste:

9. Marital status: Married/Unmarried

10. Educational qualifications:

Sr.no.	Exam passed	Grade	Year of passing	Board/University	specialization

11. Work experience:

Sr.no.	Period		Post held and scale of pay	Name of the employer	Reason for leaving
	From	To			

12. Employment exchange details (if available):

No.....Exchange.....

13. If selected what period would you require for joining the post:

14. Have you ever been declared unfit by a medical board/court.....Yes/NO.....
for appointment in any government service? If yes, details.....

I hereby declare that the particulars furnished in this form by me are true to the best of my knowledge and belief.

Date:

Place:

Signature of the candidate