

ALL INDIA INSTITUTE OF MEDICAL SCIENCES DEOGHAR

(स्वास्थ्य एवं परिवार कल्याण मंत्रालय , भारत सरकार के अधीन राष्ट्रीय महत्व का संस्थान)
(An Institution of National Importance under Ministry of Health & Family Welfare)
भारत सरकार/ Government of India

Post applied for-	SENIOR RESIDENT(NON-ACADEMIC) in Department of					
	Advt. No. AIIMS/DEO/ACAD.SEC./SR/64	dated: 04.05.2024				

Fee	e Details:			_ / NEFT Det Date		Bank name 		
1	Name (in	BLOCK	letters)				Affix Recent P	•
2	Father's		,				Size Photograph duly Self attested	
3	Date of Birth (in Christian era)							
(Pl	ease attach	attested	copy of relev	ant certificate	e)	•		
4	Perma Addr							
5	Addre correspo							
6	Mobile N Tele.					7. Citizenship		
8	E-mai	1:4				9. Gender (M/F		
	E-ma	ıı ıu	UR	SC	ST	OBC	OPH	EWS
10	Catego	ory	<u> </u>		<u> </u>	ОВС	J = 22	
,	ease tick (\ servation)) the app	ropriate cate	gory and attac	ch attested co	ppy of relevant certifi	cate if seeking	

11	Educational Qualification						
Sl. No.	Exam Passed	Name of Institute	Year of Passing	Grade/Marks Percentage			
1	10 th						
2	12 th						
3							

^{*}Attach separate sheet if required along with attested copies of relevant documents.

12	Professional Qualification:							
Sl. No.	Professional Education	Year of Final exam	Name of Institute	Name of University	Medals & awards if any	Total percentage obtained/ Pass	No of Attempt	
1								
2								
3								

* Attempt certificate to be submitted. Attach attested copies of relevant documents.

13	Experience Certificate	(Total Years of Experience):
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	Experience as	Name of Institute	From	To
1				
2				
3				

14. Have you appeared in interv	riew for in AIIMS, Deogh	ar the same post Yes/No
	Declaration	
affirm that all the statements knowledge and belief and noth	made in this application ing has been concealed t	do hereby declare and are true, complete and correct to the best of my chereon. In the event of any information being found of time, my candidature shall be liable to be rejected
I further declare that I fulfil all experience etc. prescribed for the	C	lity regarding age limit, educational qualification and
I am not employed in any other	Government Institution/ A OR	Autonomous body.
		Government Institution/Autonomous body and if ignation from my current employer.

Date:-

Signature of Candidate

Enclosures: -

Checklist of Certificates	Page No.
1. Date of Birth and Class X and XII Certificate	
2. MBBS mark sheets	
3. MBBS Degree	
4. MD/DNB mark sheets	
5. MD/DNB Degree	
6. Internship completion certificate	
7. Attempt certificates	
8. Experience Certificate	
9. MCI/ SMC registration/ FMGE certificate conducted by NBE (For Foreign graduate)	
10. No objection certificate from present employer (if applicable)	
11. SC/ST/OBC/PH certificate issued by the competent authority (if applicable)	
12. Copies of any other relevant documents (publications, awards, fellowship, patents, books/	
chapters authored etc.)	

^{*}Attach attested copies of relevant documents.