

Website: <http://www.aiimsgorakhpur.edu.in>

5. Write in the box ONLY ONE category out of SC/ST/OBC/GEN to which you belong (Attach proof of SC/ST/OBC)

6. Nationality:_____

7. Religion: _____

8. Marital Status: _____

9. Educational/Academic/Technical/Professional Qualifications (Attach proof):

Examination Passed	Subject	Name of College/Institution	Name of University	Year of Passing with %of Marks	No. of attempts
Matric					
*M.B.B.S.					
*M.D./M.S/DNB					
*DNB/M.Ch./D.M					

Please attach proof of Recognition of MBBS/MD/MS degree by Medical Council of India. Candidates possessing Degree/PG degree not recognized by MCI will not be allowed to appear for interview.

10. No. of papers published: National

International

11. Details of prizes, Medals, Scholarships & National/ International Awards and Additional Qualification such as members of scientific society etc.

12. Chronological details of up-to-date appointment after obtaining postgraduate qualification (attach experience certificate)

Post held	From	To	Organization/Employer's Name & Address

13. (a) Central/State Medical Council with which the applicant is registered (attach proof): _____

(b) Medical Registration Number _____

14. Permanent Address										15. Correspondence Address:										
Pin Code:										Pin Code:										
Mobile No:										Mobile No:										
E. Mail I.D.:										E. Mail I.D.:										

16. Details of **enclosures** attached:

DECLARATION to be signed by the candidate

I hereby declare that I am an Indian National and all statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my appointment will be liable to be terminated without any reason or prior notice. I also understand that in case of my final selection, my appointment will be provisional subject to satisfactory police verification.

Date: _____

Place: _____

(Signature of the applicant)

CHECK LIST FOR THE POST OF SENIOR RESIDENT ON REGULAR BASIS IN

THE DISCIPLINE/DEPARTMENT OF.....

Sr. No.	Copy of the documents (self -attested)	Please Tick (✓)
01	Certificate for Date of Birth (Class X or XII Certificate)	
02	MBBS Mark Sheets (All Semester)	
03	MBBS Degree	
04	Internship completion certificate	
05	Attempt certificates	
06	MCI/DCI registration	
07	MD/MS/DNB/PG Diploma certificate	
08	SC/ST/OBC/PH certificate issued by the competent authority (if applicable)	
09	Experience (if any)	
10	No Objection Certificate (if any)	
11	Copies of any other relevant documents	

Signature of the Candidate: _____

Date: _____

Remark: _____

**Verified By (DVC Committee)
Name with Signature**

DECLARATION TO BE SIGNED BY OBC CANDIDATES ONLY

I _____ son/daughter Shri _____
resident of Village/Town/City/District _____ State _____
Community _____ (**certificate enclosed**) hereby declare that I belong to the
_____ community which is recognized as a backward class by the Govt. of India for the
purpose of reservation in services as per orders contained in Department of Personnel and Training
Office Memorandum No.36012/22/93-Estt(SCT) dated 8.9.1993. It is also declared that I do not
belong to the persons/sections (creamy layer) mentioned in Column 3 of OM No. 36012/22/93-
Estt(SCT) dated 08.09.1993 and modified vide Govt. of India, Department of Personnel and Training
OM No.36033/3/2004- Estt(Res) dated 09.03.2004.

Place:

(Signature of applicant)

Date:

(In running handwriting)

CERTIFICATE / NO OBJECTION BY THE PRESENT EMPLOYER

(In case candidate is in Govt. / Semi Govt. / PSU/ Autonomous Body service etc.)

No.....

Date.....

Forwarded with the remarks that there is no objection to the selection/appointment of Dr. _____
_____ to the post applied for at AIIMS, Gorakhpur.

Date: - _____

Signature of the employer with Office Stamp

**FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES APPLYING FOR
APPOINTMENT TO POST UNDER THE GOVERNMENT OF INDIA**

This is to certify that Shri / Smt. / Kum* _____ son/daughter of shri
_____ of village/town _____ in District
_____ in _____ state belongs to _____ community which
is recognized as a backward class under:

- (1) Resolution No.12011/68/93-BCC© dated 10th September 1993, published in the Gazette of India - Extraordinary - part 1, Section 1, No.186 dated 13th September 1993.
- (2) Resolution No.12011/9/94-BCC dated 19th October 1994, published in the Gazette of India - Extraordinary - part 1, Section 1, No.163, dated 20th October 1994.
- (3) Resolution No.12011/7/95-BCC, dated 24th May, 1995, published in Gazette of India - Extraordinary - part 1, Section 1, No.88, dated 25th May 1995.
- (4) Resolution No.12011/44/96-BCC, dated 6th December 1996, published in Gazette of India - Extraordinary - part 1, Section 1, No.210, dated 11th December 1996.
- (5) Resolution No.12011/68/93-BCC, published in Gazette of India - Extraordinary - No.129, dated the 8th July 1997.
- (6) Resolution No.12011/12/96-BCC, published in Gazette of India - Extraordinary - No.164, dated the 1st Sept 1997.
- (7) Resolution No.12011/99/94-BCC, published in Gazette of India - Extraordinary - No.236, dated the 11th Dec 1997.
- (8) Resolution No.12011/13/97-BCC, published in Gazette of India - Extraordinary - No.239, dated the 3rd Dec 1997.
- (9) Resolution No.12011/12/96-BCC, published in Gazette of India - Extraordinary - No.166, dated the 3rd Aug 1998.
- (10) Resolution No.12011/68/93-BCC, published in Gazette of India - Extraordinary - No.171, dated the 6th Aug 1998.
- (11) Resolution No.12011/68/98-BCC, published in Gazette of India - Extraordinary - No.241, dated the 27th Oct 1999.
- (12) Resolution No.12011/88/98-BCC, published in Gazette of India - Extraordinary - No.270, dated the 6th Dec 1999.
- (13) Resolution No.12011/36/99-BCC, published in Gazette of India - Extraordinary - No.71, dated the 4th April 2000.

Shri/Smt./Kum* _____ and/or his/her family ordinarily reside(s) in the District
of the _____ State. This is also to certify that he/she does not belong to the
persons/sections (**Creamy Layer**) mentioned in column 3 (of the Schedule to the Government of India, Department
of Personnel & Training OM NO.36012/22/93 – Estt(SCT), dated 08.09.1993) and modified vide Government of
India, Department of Personnel and training O.M No.36033/3/2004-Estt.(Res) dated 09.03.2004.

Place: _____

Signature _____

Dated: _____

District Magistrate/Dy. Commissioner etc.

*Strike out whichever is not applicable

(With seal of office)

NB: (a) The term 'ordinarily' used here will have the same meaning as in section 20 of the Representation of
People's Act., 1950.

.....The
Authorities competent to issue OBC caste certificates are indicated below:

- (i) District Magistrate / Additional Magistrate / Collector / Deputy Commissioner / Additional Deputy Commissioner /
Deputy Collector / 1st class Stipendiary Magistrate / Sub - Divisional Magistrate / Taluk Magistrate / Executive
Magistrate
/ Extra Assistant Commissioner (not below the rank of 1st class Stipendiary Magistrate).
- (ii) Chief Presidency Magistrate / Additional Chief Presidency Magistrate/ Presidency Magistrate.
- (iii) Revenue Officer not below the rank of Tahasildar, and
- (iv) Sub-Divisional Officer of the area where the Candidate and or his family resides.

BIO-DATA

Name of the Department: -

1. Applicant's Name (in **BLOCK LETTERS**) :-
2. Father's Name :-
3. Date of Birth of Applicant:-
4. Category:-
5. Educational/Academic/Technical/Professional Qualifications: -

Examination Passed	Subject	Name of College/Institution	Name of University	Year of Passing with %of Marks	No. of attempts
Matric					
M.B.B.S.					
M.D./M.S/DNB					
DNB/M.Ch./D.M					

6. Chronological details of up to date appointment after obtaining postgraduate qualification (attach experience certificate)

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7. No. of papers published: -

National	International

8. Details of prizes:

1. Medals:

2. Scholarships:

3. National/ International Awards and additional qualification such as membership of scientific societies etc.:

9. Any other information of meritorious nature:

Date: _____

Place: _____

(Signature of the applicant)