

DEPARTMENT OF MICROBIOLOGY
ALL INDIA INSTITUTE OF MEDICAL SCIENCES, AIIMS
KALYANI

Project titled “Capacity Building and Strengthening of Hospital Infection Control to Detect and Prevent Antimicrobial Resistance in India”

APPLICATION FOR THE POST OF:

To,
Principle Investigator,
Professor & HOD,
Dept. of Microbiology All India
Institute of Medical Sciences AIIMS
Kalyani

Paste Recent
Photograph
Here

Name of Applicant:

Name of Father:

Name of Mother:

Date of Birth:

PAN NO:

Aadhar No:

Current Address:

Contact No:

Education Qualification Details:

Board/University	Course	Year	% Marks	Division

Experience (if any):

Institution	Post	Duration

Any other:

Signature of candidate

DECLARATION BY THE CANDIDATE

Post applied for _____ for the Project titled “**Capacity Building and Strengthening of Hospital Infection Control to Detect and Prevent Antimicrobial Resistance in India**” at the Department of Microbiology, All India Institute of Medical Sciences, AIIMS Kalyani.

I hereby declare all the statements made in the application are correct and complete, to the best of my knowledge and belief and nothing has been concealed. In the event of any information found false or incorrect at any time, action may be taken against me for disqualification of my candidature for the post applied for and I shall abide by the decision of the Institute. I declare that I shall abide by the norms of my personal vaccination as required by the PI and shall refrain from any deviation from the personal vaccination requirements other than exclusively clinically indicated and validated by the Medical Board at AIIMS Kalyani.

Date:

Place:

Signature of Candidate

ANNEXURE

<u>S.No.</u>	<u>Particulars of enclosures</u>	<u>Marked page</u>
-		
1.	Date of birth certificate	
2.	Matriculation Certificate	
3.	Graduation certificate	
4.	Relevant Highest Degree certificate	
6.	Experience certificate(s)	
7.	Caste / Community certificate	
8.	Any other Relevant Certificate	

Date:

Place:

Signature of Candidate