

अखिल भारतीय आयुर्विज्ञान संस्थान (एम्स) कल्यानी

All India Institute of Medical Sciences (AIIMS) Kalyani (Statutory Body under the Aegis of Ministry of Health and Family Welfare , GOI) राष्ट्रीयराजमार्ग - 34 , बसन्तपुर , सागूना , कल्याणी , ज़िला - नदिया , पश्चिमबंगाल - 741245 NH-34 Connector ,Basantapur , Saguna , Kalyani , District Nadia , West Bengal 741245

Annexure: Application form 1. (a) Full Name (Block Letters): Latest colour photograph (b) Sex: Male/Female (c) Marital Status: Married/Unmarried 2. Father's/Husband's Name: 3. (a) Mailing Address: Mobile No..... Email ID (b) Permanent Address. 4. Date of Birth: 5. Category: Gen/OBC/SC/ST (Attach attested copy of certificate) 6. State of Domicile: 7. Nationality:



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o.	Educational	Qua	mncai	ion.

Examination Passed	Year of Passing	Percentage of marks	Class/Division	University/ Institution
Matric/S.S.C.				
Intermediate				
Graduation				
Others				

9. Work Experience:

Post held (Indicate Temporary/Permanent)	Period		Total Period			Pay Scale	Employer's Address
	From	То	Yrs.	Months.	days		

11. Present employment/Post held if any:								
12. If selected, what notice period would you required before Joining								
Date:								
Signature of Candidate								