

Application for the post of

at AIIMS on deputation basis

1	Name and address in BLOCK letters		Affix your Recent Coloured Passport size photograph			
2	Date of birth (in Christian era)					
3	Date of retirement under Central/State Government Rules					
4	Educational Qualification:					
5	Whether educational and other qualifications required for the post are satisfied (if any qualification has been treated as equivalent to the one prescribed in the rules, state the authority for the same).					
	Qualifications / Experience					
		Required		Possessed by the officer		
	Essential					
	Desirable					
6	Please state clearly whether in the light of entries made by you above, you meet the requirements of the post.					
7	Details of employments (in chronological order) enclose a separate sheet, duly authenticated by your signature if the space below is insufficient.					
	Office/Instt./Organization	Post Held	From	To	Pay-band and Grade Pay (Scale of Pay if in pre-revised scale of pay)	Nature of Duties
8	Nature of present employment (i.e. adhoc or temporary or quasi-permanent or permanent)					
9	In case the present employment is held on deputation/contract basis, Please state : (a) the date of initial appointment (b) period of appointment on deputation/contract (c) name of the parent office/organization to which you belong					

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10	Additional details about present employment, please state whether working under : (a) Central Government (b) State Government (c) Autonomous Organization (d) Government undertaking (e) University	
11	Are you in revised scale of pay? If yes, give the date from which the revision took place and also indicate the pre-revised scale.	
12	Total emoluments per month now drawn.	
13	Additional information, if any which you would like to mention in support of your suitability for the post. Enclose a separate sheet, if the space is insufficient.	
14	Whether belongs to SC/ST/OBC (if yes, please specify) :	
15.	Contact Nos. :- 1) Office 2) Residence 3) Mobile 4) e-mail address	

Date : _____

Signature of the candidate :

Countersigned : _____

Address :

(Employer/Authorized Officer)
