Application form for the post of JRF

Name (in capital):
Apply for Post:
Date of Birth:

5. Whether belongs to SC/ST/OBC category

4. Age:

7. Nationality:8. Marital Status:

9. Add								
	lhaar number:							
11. Mol			Landline No.					
12. E-m								
Educati	onal Qualific	ations:			1		1	
S.No	Examination		Board/University		Passing Year		Percentage scored	
	passed							
1								
2								
3								
Experie S.No	ence (Post Qua	Name of			То	То		Duties &
		Institution	1	(DD/MM/YY)	(DD/MM/YY)	Ex	perience	Responsibility
1								
2								
3								
4								
Date: Place:						,		Signature

*Applicants must fill up all the columns of the application form properly. Single/consolidated SCANNED PDF of the signed application form along with supporting document as enclosures and complete in all respects should also be

mailed to poorvi.physio@aiimsrishikesh.edu.in on or before 30th June 2025