अखिल भारतीय आयुर्विज्ञान संस्थान भोपाल
ALL INDIA INSTITUTE OF MEDICAL SCIENCES, BHOPAL

(An Autonomous Institute under Ministry of Health & Family Welfare, Government of India)
Saket Nagar, Bhopal (M.P) – 462020
Website: www.aiimsbhopal.edu.in

Application form for engaggement of Gynaecology Consultant (IVF)

on Contractual basis at AIIMS, Bhopal

Advertisement No.

Affix passport size self-attested colour photograph

1- Name in block letters:-

2- Father/Husband's Name in block letters:-

3- (a) Permanent Address:-

State

Pin

(b) Postal Address:-

State

Pin

4- Contact Details:-

Phone No. with STD Code:

Mobile No.

E-Mail

5- Date of Birth as per the certificate

Age as on date of Interview

6- Gender **Male** **Female**

Tick the relevant

7- Candidate's Category (UR/SC/ST/OBC/EWS)

8- Category Applied for (UR/SC/ST/OBC/EWS)

Mention the Category (attach relevant Supporting document. In case of OBC & EWS, the certificate should be issued by the appropriate authority recently valid for appointment to the post reserved under Govt. of India)

9- Are You **By Birth** **By Domicile**

(a) A citizen of India by birth or by domicile?

10-Person with Benchmark Disability (PwBD)/

If yes, then mention the %

11-Educational Qualification:-

Name of the Examination	Subject/ Discipline/ Speciality	University/ Institute/ College	Date of completion of course	Month & Year of Passing final examination	Marks Obtained	Duration of Course

(Please tick the relevant Degrees)

12- Post PG Experience:

Name of the Organization	Date of Joining	Date of leaving	Name of the post	Whether on Adhoc/ Contract/ Regular/Outsourced	Nature of Work (Teaching /Research or Patient Care)	Pay Band and present basic pay/Level

13- Experience of Research Work and available published material, if any, mention the details and enclosed reprint thereof :-

14- Publication and Research Work (numbers only):-

	Published	Under Publication	1st Author/ Communication Author
1- Research Paper **(a) Indexed Journals** **(b) Non- Indexed Journals**			
2- Books **(a) Text Books** **(b) Edited Books** **(c) Educational Books**			
3- Chapter in Books			
4- Abstracts **(a) Indexed Journals** **(b) Non- Indexed Journals**			

List of Publications in support of the aforesaid figures should be enclosed.

15- Projects as Chief Investigator:

Source of Funding	Year	Total Amount

16 - Award, Fellowship and Membership of Professional Bodies:

17 - Membership of Editorial Boards of Indexed International Journals/ Review Committees at National Bodies and Institutions:

18 - Service: [Contributions made towards the Development of New Unit/ Specialty/ laboratory / Facility/ Programs/ Therapeutic or Diagnostic or Diagnostic Procedure Developed or Patens taken (enclosed evidence)]:-

19- Contributions in Community & National Programmes:

20- Describe your most notable contribution in teaching and research in 200 words:-

21- In your understandings, top 10 priority required areas for the Institute.- [Please add sheets, if required]

D.D. No. _____Amount (in Rs.) _____Dated _____

Bank Name _____

22- Attach self-attested photocopies of the following certificates/documents in the order as mentioned below.

1- Certificate in respect of date of birth.
2- Degree certificates of the Qualification as mentioned in Sl. No. 11 of this application form.
3- Experience Certificate as mentioned in Sl. No. 12 of this application form.

UNDERTAKING

I solemnly affirm that the information furnished above is true and correct in all respects to the best of my knowledge. I have not concealed any information. I undertake that any information furnished herein is found to be incorrect or false, I shall be liable for action as per rules in force.

Place:

Date:

Signature of the Candidate

Name of Candidate in block letters)

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