

BHABHA ATOMIC RESEARCH CENTRE

MEDICAL DIVISION

Application No. _____

APPLICATION FOR THE POST OF _____



1. **Name in full beginning with Surname (in block letters)** : **Shri/Smt./Kum)** _____

2. **Nationality** : _____
3. **Marital Status** : _____
4. **Date of Birth (in Christian era)** : _____
5. **Address in block letters (a) for correspondence with PIN code:** : _____
: _____
: _____
: _____
- Telephone/Mobile No.** : _____
- Email ID** : _____
- (b) Permanent Address** : _____

6. Educational and Professional Qualification from SSC onwards:-

Sr. No	Examination passed	University/Board /Institution	Year of passing	Subjects	Class & % of marks
1.	SSC				
2.	HSC				
3.					
4.					
5.					

7. Experience (Particulars of all previous and present employment are to be furnished)

Name & Address of employer/Institution	Post Held with Pay	Whether Central /State /Govt./PSU	Period of Service		Permanent or Temporary	Reason for Leaving
			From	To		

8. Area of Specialization: _____

9. Details of relative employed in D.A.E or its constituent:-

Sr no.	Name of Relative	Relationship	Unit in which employed	Post held

10. Any other information you may wish to add: _____

11. List of attested documents attached (Put [X] in the applicable box).

- a) School Leaving Certificate (for Date of Birth) []
- b) Mark sheets of Educational & Professional Qualification []
- c) Passing Certificate []
- d) Experience certificate []
- e) MMC/MNC/MPC/DCI/OTPT Registration Certificate []

Date: _____

Signature: _____