

BHABHA ATOMIC RESEARCH CENTRE
MEDICAL DIVISION

Application No. _____

APPLICATION FOR THE POST OF _____ (LOCUM BASIS)

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1.	Name in full beginning with Surname (in block letters)	: (Shri./Smt./Kum) _____
2.	Nationality	: _____
3.	Marital Status	: <u>Married / Single / Widower / Widow</u>
4.	Age & 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.	MBBS				
4.					
5.					

(P.T.O.)

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

Name & Address Of Employer/Institute	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 relatives employed in D.A.E. or its constituent units:-

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

10. Any other information you may wish to add:

12. 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/IPA Registration Certificate []

Date: _____

Signature: _____