



BHARAT HEAVY ELECTRICALS LIMITED
POWER SECTOR EASTERN REGION-KOLKATA

BIO DATA

FOR ENGAGEMENT AS PART TIME MEDICAL CONSULTANT

Advt. No. PTMC/2023/01

Please affix self-attested Passport size photograph

(Duly filled Bio-Data Form to be sent along with below mentioned documents)

1. POST APPLIED FOR:

2. NAME (in capital letters as per Matriculation):

3. FATHER'S NAME:

4. DATE OF BIRTH:
(dd/mm/yyyy)

5. AGE (in years & months:
as on 01.10.2023)

6. CATEGORY (GEN/SC/ST/OBC/EWS):

7. NATIONALITY:

8. PHYSICALLY CHALLENGED (YES/NO):

IF YES(VH/OH/HH):

% AGE

9. EX-SERVICEMAN (YES/NO):

IF YES, YEARS OF SERVICE:

10. ADDRESS FOR CORRESPONDENCE

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11. EDUCATIONAL QUALIFICATIONS

Qualification	College/ University	Full Time/ Part Time	Specialization	Period (From -To)	Year of passing	Marks obtained	% of marks	Whether recognized by MCI
MBBS								
PG Diploma								
MD/MS/ DNB								
Others								

12. EXPERIENCE DETAILS

Name of Organisation and Address	Govt/PSU/ Semi- Govt/Private Practice	Type of Engagement (Regular/Contract/ Private Practice)	Designation/ Area of Work	Period From	Period To



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13. Medical Council of India / State Medical Council Registration:

Regn. No. Date of Regn. Valid up to

14. Have/has your parent(s)/spouse been in service of BHEL? (YES/NO)

If yes, please furnish details:

(a) Status of Employment:
(Serving / Retired / Death during service /Death after service)

(b) Staff Number & Unit:

15. Phone number / Mobile No.

16. E mail ID:

DECLARATION

I hereby declare that statements made by me in this bio data form are true and complete. If I am engaged and the company finds at any time that any part of the information given by me is incorrect and false or that I have concealed any relevant information, I agree that my engagement shall be liable to be terminated immediately without any notice or compensation.

DATE.....

SIGNATURE.....

PLACE.....

NAME.....

Checklist of documents:

1. DOB Proof- SSC/Matriculation Certificate
2. MBBS Certificate and Mark Sheet/s
3. Registration Certificate for MBBS issued by Medical Council of India or by a State Medical Council.
4. Proof of Experience- Preferably an Experience Certificate on letter head from an Organisation / Hospital issued by a Competent Authority.
5. No Objection Certificate: Persons employed in Govt./Semi-Govt./ Public Sector Undertakings/ Autonomous bodies should apply through Proper Channel. However, in the event of difficulty, they may send the application directly and produce the No Objection Certificate at the time of interview.