STEEL AUTHORITY OF INDIA LIMITED DURGAPUR STEEL PLANT

APPLICATION FORMAT FOR ENGAGEMENT OF CONSULTANTS (DOCTORS IN MEDICAL DISCIPLINES) AT DURGAPUR STEEL PLANT (DSP) & ALLOY STEELS PLANT (ASP) – 2024

(WALK-IN-INTERVIEW)

1. 2.	Post applied for Name in full	. GDMO / GDMO(Dental) /Specialists (Discipline:)
	(CAPITAL LETTERS)	:									
3.	Father's Name	:								Past	e your recent
4.	Date of Birth	:								passport size	
5.	Present Address	:									colour
										р	hotograph
_	State	:	Pin Code:								
6.	Permanent Address	:									
	State	:				Pi	n Code:				
7.	Mobile No	:				8. E-mail id:					
9.	Marital status	10. Ge	nder:			11.	Religio	n:			
12.	Nationality:	13. Caste / Community (*):							14. Pw	/BD (Y/N)?
			(*) For OBC-NCL candidates, Certificate in the format (for Central Govt & CPSU) issued on or after 01.04.2024 is required)						15. Pw	/BD type	:
16. E	ducational Qualification (MB	BS onwards	3):				. ,				
	Qualification	Name of the	he Board / Council		Year of passing			njor subjects /	Perce	ntage	Class/ Division
		/ Ur		sity			Sı	pecialization			
17. <u>E</u> >	rperience(if any):		,				,				
	Organization			Joining Date			te of aration	Designation (at the time of separation)		Discipline	
18. Se	eparation details:										
	Organization	Joining D	ate	Date of Separation		Separation type		Designation (at the time of separ		ration)	Department / Area / Section
				Separation				(at the time of separ		allon)	Area / Section
10	(a) Valid Danistration Contitionts	of Ctota Ma	ا ده ا	: I /N / C I / N II	MC/DC	N (DIa	4:-1-\.				
	One of the desired control of the desired co										
	eclaration :			(c) Glat				(a) valid upto :			
	I agree to all the terms and cor										
	dtd.30.07.2024 and all the info documents attached herewith my candidature may be cancel	are found to l	oe fals	se and if I am	unable	to pro	duce/ sub				•
	I further declare that I have not	been separa	ated fro	om SAIL/ othe	er PSUs	s / Gov	ernment b	by opting for Volun t	ary Retire	ement.	
	In the event of any wrong sta Disciplines) is liable to be term				is/are	detect	ed afterwa	ards, then my enga	agement o	of Consu	Itant (Doctors in Medica
Date	e:							(Signa	ature of th	ne appli	cant)
NB:	Applicants are required to be	ring all relev	ant do	ocuments (or	iginal-	-1 set	self-attes	ted) at the time of	walk-in-ir	<u>ntervie</u> w	