

Recent Passport
size coloured
photographs duly
signed.

Application Format
(Other than Retired Doctors)

Engagement of Contract Medical Practitioner for S.E.Railway, Kharagpur Division
as per Advertisement No.01/26(Med.) CMP-2026/KGP.

Category(Specialist or Genl Duty) :-

Name in Block letters. :

Father's/Husband's Name. :

Nationality :

Date of Birth. :

Age as on 01-04-2026. :

Permanent Address **with PIN.** :

Nearest Railway Station from the
place of residence. :

**Communication Number &
E-Mail.** :

PAN No. :

Aadhaar No. :

Caste (Genl/SC/ST/OBC) :

Medical Registration. No. :

MBBS particulars. :

Year of Passing.:

: % age of Marks in final MBBS Exam.

: **Number of attempt in every MBBS.**

: Whether recognized by MCI.:

Post Graduate particulars. :

PG Degree/Diploma in :

: Year of Passing. :

: Whether undergoing(in case, not yet
: passed).

: Whether recognized by MCI.:

Experience details if any after the
graduation/Post Graduation(having both
outdoor & indoor facility will be
considered as experience) with documents. :

I hereby declare that all the statements made in this application are true and correct. I know that I am not eligible for any TA/DA for this interview.

Dated.:

Full signature of the candidate.

Recent passport
size coloured
photographs duly
signed.

Application Format**(For Retired Govt(Rly/Central/State/PSU) Doctors)**

for engagement of Contract Medical Practitioner for S.E.Railway, Kharagpur
Division as per Advertisement No.01/26(Med.) CMP-2026/KGP.

Category(Specialist or Genl Duty) :-

Name in Block letters. :

Date of Superannuation/VR :

Last designation at the time of
Superannuation/VR. :

Last pay at the time of
Superannuation/VR. :

Pay Band Pay & Grade Pay at the
time of Superannuation/VR. :

Name of the Organisation where
from Retired/VR. :

Basic Pension (Rs.). :

PPO No. :

Date of Birth. :

Age as on 01-04-2026. :

Permanent Address **with PIN.** :

Nearest Railway Station from the
place of residence. :

Communication Number & E-Mail. :

PAN No. :

Aadhaar No. :

Caste (Genl/SC/ST/OBC) :

Medical Registration. No. :

MBBS particulars. :

Year of Passing. :

% age of Marks in final MBBS Exam. :

Number of attempt in every MBBS. :

: Whether recognized by MCI.:

Post Graduate particulars. :

PG Degree/Diploma in :
: Year of Passing. :
: Whether recognized by MCI.:

Experience details, if any after the
graduation/Post Graduation.. :
(having both outdoor & indoor facility will
be considered as experience) with documents.

I hereby declare that all the statements made in this application are true and correct. I know that I am not eligible for any TA/DA for this interview.

Dated.:

Full signature of the candidate.