

Sanjay Gandhi Postgraduate Institute of Medical Sciences, Lucknow-226 014

APPLICATION FORM
Walk-in interview for Ad-hoc short-term Senior Resident
(Hospital Services) / Medical Physics Resident/
Demonstrators

Paste a selfsigned Passport-Size Photograph

Do not staple

	De	tails of Bank Dra	ift			Signature of Candi	date		
1.	Department/Sp	ecialty							
2.	First Name		M	iddle Name		Surname			
3.	Father's/Husba	nd's Name							
	Mother's Name								
4.	Date of Birth (D	DD/MM/YY)		/ [/	Age as on date of application	of		
5.	Gender: Male	/ Female /	Fransgender						
6.	Martial status (Single=1, Marrie	ed=2, Widow=	3, Divorced=4	, Separated=5)				
8. P	e-mail: Phone: Mobile:								
		, , , , ,		Mobile:					
9.	Category (SC=1,	ST=2, OBC=3, G	en=4)		C inai				
10.	State of domici	le							
11.	MBBS Registration number (if applicable)		Date	Name of	Medical Council				
12.				Academic Qua	lifications				
A	Examination Passed	Institution	Subject/ Specialty	Year	% Marks/ Division	No. of Attempts			
A	Matriculation								
В	MBBS								

	MD/MS/DNB*							MD/MS degre	
-								recognition status YES/NO	
D	Others (Specify)							1	
13	Employment det	ails							
S.L	Post Held	Institution	1	Un	iversity		Duration		
							From	То	
14. 1	Have you have work	ked at SGPGI ear	lier? If yes, p	lease	provide the fo	llowing	details:		
Post	Held		Duration				son for leaving		
		Froi	m	То				Christian and the second	
		Dec	laration of [)enen	dents				
Nam	e		Age Relation with Occupation*				Inco	ma Inau	
			applicant		* Income (per month)*				
*with	proof.								
CCICII	ployed, get your appli icate': ied that undersigned								
					Signature	& Seal o	f Head of In	stitution	
Dated		1,	Declarat	ion					
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