

(A JOINT VENTURE OF GOVERNMENT OF INDIA AND GOVT OF DELHI)

ADVTT. No. DMRC/PERS/HR/22/HR/2018(136)

ANNEXURE I

Photo

DMRC APPLICATION FORMAT

(
TO I
BE FILLED
IN CAPITAL
LETTERS BY
THE APPLICANT
` IN HIS/HER OW
/N HANDWRITING
)

S.No.	DETAILS			PARTICULARS					
1 A	POST NAME			CONSULTANT DOCTOR					
В	POST CODE			CD 01					
C	PREFERRED PLACE OF POSTING (ZONE)			1. 2.					
2	APPLICANT'S NA	AME (Sh./Smt./Ms	.)						
3	FATHER / HUSBA								
4	DATE OF BIRTH								
5	AGE AS ON 01/07/2018 (Not more than 60 years)			YEA	ARS MONTHS		DAYS		
6	CORRESPONDE	NCE ADDRESS		STATE:		PINCO	DE.		
7	PERMANENT A	DDDFCC		SIAIE.		TINCO	DE.		
8	CONTACT NUMI		CODE						
9	MOBILE NUMBE	CR CR							
10	EMAIL ID								
	PERMANENT MCI/DMC/STATE MEDICAL COUNCIL REGISTRATION NO. & PLACE OF REGISTRATION			REGISTRAT	NB: STATE ΓΙΟΝ ΝΟ.	MEDICA:	L COUNCIL		
11		EDUCATI	ONA]	L QUALIFIC	CATIONS				
S.N.	NAME OF EXAMINATION	NO. OF ATTEMPTS	WIT	X. MARKS TH MARKS TAINED	% OF MARKS	MONTH/ YEAR OI PASSING	F UNIVERSI		

S.N.	NAME OF EXAMINATION			WIT	AX. MARKS TH MARKS TAINED		% OF MARKS		MONTH/ YEAR OF PASSING		COLLEGE & UNIVERSI TY	
12	EXPERIENCE CI AUTHORITY CLE OF THE JOB AN SHOULD BE GIVI	EARLY D REQ	INDICATI UIRED DI	NG D ETAII	ATES (I LS. (PAI	FRO RTIC	M A	ND T	ΓO)	STAT	ING T	THE NATURE
	TOTAL	EXPER	IENCE		Y	EAI	RS	I	MO	NTHS		DAYS
				~	05.55	 -	D					
		(DET Separate Sl		OF EXI				essai	rv)		
S.N.	NAME OF THE HOSPITAL/CLIP PSUs AND ADDE	NICS/ I	-		v	FRO	<u> </u>		ТО		REMU CTC ()	JNERATION/ pa)
A												
В												
C												
	BRIEF DESCRIP	TION C	OF THE WO	ORK I	EXPERI	ENC	EE (S	epar	ate	sheet r	nay be	allowed)

13	HAVE YOU EVER BEEN ARRESTED?	YES / NO
14	HAVE YOU EVER BEEN PROSECUTED?	YES / NO
15	HAVE YOU EVER BEEN KEPT UNDER DETENTION?	YES / NO
16	HAVE YOU EVER BEEN BOUND DOWN?	YES / NO
17	HAVE YOU EVER BEEN FINED BY A COURT OF LAW?	YES / NO
18	HAVE YOU EVER BEEN CONVICTED BY A COURT OF LAW?	YES / NO
19	IS ANY CASE PENDING AGAISNT YOU IN ANY COURT OF LAW?	YES / NO
20	HAVE YOU EVER BEEN INVOLVED IN ANY POLICE OR CRIMINAL CASE?	YES / NO

I hereby declare that the particulars furnished above are true. I understand that my candidature will be cancelled, if any information is found to be incorrect or false at any point in time.

Date:			
Place:			
			Signature of Candidate
		Name: Mobile No. : _ Email ID:	

Documents to be enclosed (whichever applicable)

- 1. Educational Certificates (Graduation, Post Graduation & Others)
- 2. Work Experience Certificate
- 3. Copy of current DMA/IMA Registration.