

INDIRA GANDHI INSTITUTE OF MEDICAL SCIENCES: SHEIKHPURA: PATNA-14.
APPLICATION FORM FOR THE POST OF JUNIOR RESIDENT



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1.	Advertisement No.	:	<u>04/Jr. Resident/IGIMS/Estt./2022</u>						
2.	Name of the Applicant	:							
	Permanent Registration Number (MCI/Bihar Medical Council)	:	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">Reg. No. :</td> <td style="width:50%;"></td> </tr> <tr> <td>Date of Registration:</td> <td></td> </tr> </table>			Reg. No. :		Date of Registration:	
Reg. No. :									
Date of Registration:									
3.	Father's Name	:							
4.	Date of Birth (With Proof of Age)	:	<u>Date:</u>	<u>Month:</u>	<u>Year:</u>				
				<u>Age:</u>					
5.	Whether belongs to <u>SC/ST/BC/EBC/BC (Female), EWS or Handicapped:</u> <small>(Cast Certificate issued by the Circle Office, for SC/ST candidates along-with Domicile Certificate and Caste Certificate issued by Circle Officer for BC and EBC candidates with exemption from Creamy Layer, along-with Domicile Certificate should be attached).</small>								
6.	Permanent Address	:							
7.	Address for Correspondence	:							
8.	Contact Number (Mobile/Land Line)	:							
9.	Citizenship:	:							
10.	Educational Qualification: (Attach all Certificates: Photocopy)		Screening Certificate in case of Foreign Degree						
	Examination Passed: MBBS	College/Institution.	Year of Passing	Marks Obtained	Percentage of Aggregate Marks in all Professional Examination.				
11.	Name of the College/Institution :								
12.	Date of Completion of Internship: From: to								
13.	Department in order of preference:								
	1 st	2 nd	3 rd						
14.	<u>Whether done any Junior Residency (Non-Academic) at IGIMS or out-side , if so mention the department/period subject</u>								
	<u>Subject</u>	<u>From</u>	<u>To</u>	<u>Organization/Institution</u>					
15.	Details of Bank Draft with Date of issue, Place and Amount								
	Name of the issuing Bank	Place & Date	D.D. No.	Amount					

PLEASE NOTE:

- 1) Incomplete application/s will be rejected straight away.
- 2) If it found that the applicant has suppressed any information or given wrong information his/her Junior Residency will be terminated forthwith without assigning any reason.

DECLARATION

I do hereby declare that the information/s furnished above is true and correct to the best of my knowledge and I shall abide by the Rules and Regulation of IGIMS.

Place:

Date:

Signature of the Applicant

N.B.: Please affix the following with the application form:

1. One recent passport size photograph (Space Provided)
2. Self attested copies of all certificates/testimonials.