

**INDIRA GANDHI INSTITUTE OF MEDICAL SCIENCES: SHEIKHPURA: PATNA-14****PROFORMA FOR THE POST OF SENIOR RESIDENT/Scientist -I**

Affix your recent Photograph

1.	Advertisement No.	:				
2.	Name of the Post & Department applied for:	:				
3.	Name of the Applicant & Registration Number (MCI/State Medical Council)	:	Reg. No.		Dated:	
4.	Father's Name	:				
5.	Date of Birth (With Proof of Age) & Age on cut-off date.	:	D/O/B:	Date:	Month:	Year:
			Age:Yrs.MonthsDays
6.	Whether belongs to SC/ST/EBC (MBC), BC, BC- (Female) or Handicapped: Cast Certificate issued by the Circle Officer of respective District/Circle for SC/ST candidates along-with Domicile Certificate and Caste Certificate issued by Circle Officer for EBC (MBC) and BC candidates with exemption of Creamy Layer, along-with Domicile Certificate should be attached).					
7.	Permanent Address	:				
8.	Address for Correspondence	:				
9.	Contact Number (Mobile/Land Line)	:				
10.	Educational Qualification: (Attach all Certificates: Photocopy)					
	Particular of Qualification	Board/Univ.	Year of Passing	Marks Obtained	Percentage of Marks	Attempt
11.	working Experience (Attach Certificates: Photocopy)					
	Name of the Institution	Posted as	From	To	Special Training in the specialty (if any)	
12.	Status of Employment:	CANDIDATE ALREADY EMPLOYED SHOULD GET THE FOLLOWING ENDORSEMENT SIGNED BY HIS/HER PRESENT EMPLOYER				
		Dated.....SignatureDesignation				
13.	Details of Bank Draft with Date of issue, Place and Amount					
	Name of the issuing Bank	Place & Date	D.D. No.	Amount		
14.	List of Enclosures					

Place:

Date:

Signature of the Applicant