



अखिल भारतीय आयुर्विज्ञान संस्थान भोपाल  
ALL INDIA INSTITUTE OF MEDICAL SCIENCES BHOPAL

**APPLICATION FORM FOR THE POST OF SENIOR RESIDENTS (NON-ACADEMIC)**

Advt. No.: AIIMS Bhopal/SR (Non-Acad)/2022/01(1) dated: 18-08-2022

Post applied for : SENIOR RESIDENTS (NON-ACADEMIC)

Applied Category :

Department :

Name of Candidate (in capital) :

Father's/Husband's Name :

Mother's Name :

Address (Permanent) :  
(Address proof to be enclosed)

Address for correspondence :

Contact No. :

Mobile No. :

Email-Id :

Date of Birth :

Age as on date of Application :

Category :

Gender :

AIIMS BHOPAL

**Educational/Professional Qualification:**

Degree/Exam	Specialization/Subject	Name of Board/University	Year of passing	Division	Percentage
10 <sup>th</sup>					
12 <sup>th</sup>					
MBBS					
MD/MS/DNB					
Any other					

**Research Publications/Presentation:**

Title of Publication	Author/Co Author	Name of Publication	National/International	Date of Publication/Presentation

**Work Experience:**

Sr. No	Name of Department/Section	Name of post held	Date of Joining	Date of Leaving

Whether MBBS/M.D/MS/DNB degree is recognized by Medical Council of India :

Whether registered with State Medical Register or Indian Medical Council :  
(Attached the copy of registration)

Registration No :

State in which registered:

## DECLARATION

I hereby declare, that all statements made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect my candidature is liable to be cancelled/terminated. I will have no claim or absorption after termination/completion of tenure contract. I shall abide by terms & condition as prescribed. In the event of ineligibility being detected before or after the selection procedure, action can be taken against me under the relevant rules/instruction and hereby undertake to abide by them.

**Date :**

**(Signature of Candidate)**

**Place : .....**

**Name:**

**Enclosure Checklist :**

1. Filled Application Form
2. Demand Draft of requisite fee in favour of AIIMS, Bhopal.
3. Identity Proof (PAN Card, Passport, Driving License, Voter Card, Aadhar Card etc.)
4. Address Proof.
5. Five recent passport size photographs.
6. Certificate showing Date of Birth. (10th Certificate / Birth Certificate).
7. Class 10th & 12<sup>th</sup> Mark sheets & Certificates.
8. UG/PG Mark sheets & Certificates.
9. Internship Completion Certificate and Attempt Certificate.
10. Registration with National Medical Commission/State Medical Council / Respective Council.
11. FMGE certificate conducted by NBE (For foreign graduate).
12. No Objection Certificate.
13. Category Certificate (OBC/SC/ST/EWS/PwBD).
14. Publications, if any.
15. Experience Certificate.
16. Any other relevant information/documents.

**(Signature of Candidate)**