



**Application Format for the post of Senior Resident/Senior Demonstrator-January, 2009**

**IMPORTANT INSTRUCTION :** 1) Please read the Advertisement carefully before filling this form. 2) Use Blue or Black Ball Pen for filling this form. 3) Tick '✓' in the appropriate box against Columns 1, 6, 7, 8 and 10. 4) This form should be downloaded from net only. 5) Use laser printer to download the format on A-4 size paper.

1. Post applied for Senior Resident  Senior Demonstrator

2. i) Department applied for : 



 Department/Group Code: 



  
 [See Advertisement for department/Group code]

3. Full name of applicant (in CAPITAL letters)

4. Father's /Husband's name (in CAPITAL letters)

5. Mother's name (in CAPITAL letters)

6. Community (Tick '✓' in the appropriate box)	7. Sex	8. Nationality	9. Date of Birth
SC    ST    OBC    Others	Male    Female	Indian    Others	D D    M M    Y Y Y Y
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

10. Details of Qualifying Examination passed: MBBS    PG-Diploma    MD    MS    MDS    MHA    M.Sc    Ph.D  
 ('✓' in the appropriate box)

Subject/Discipline passed	University/Institution	Date, Month & year of passing

11. Details of last Employment after postgraduate (PG-DIPLOMA/MD/MS/MDS/MHA/M.Sc/Ph.D), if any.

Name of the Hospital/Institution	Position held	From	Period To

12. a) Phone No.(with STD Code)..... b). FAX No.....  
 c) Mobile No. .... c). e-mail.....

13. Number of Research Publications/awards, if any. (Please attach list) .....

14. Name & full mailing address (in CAPITAL letters) Name:..... Address:..... ..... ..... Pin Code: <table border="1" style="display: inline-table; width: 60px; height: 20px;"></table>	15. Photograph 1. Paste here (do not pin or staple) a recent passport size photo. 2. The photograph should not exceed this box. 3. The photograph should NOT be attested. 4. If the photograph is not clear, the application will be rejected.	16. Candidate's Signature <table border="1" style="width: 100%; height: 50px;"></table> 17. Candidate's Left Thumb Impression <table border="1" style="width: 100%; height: 50px;"></table>
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18. Details of Demand Draft (if deposited earlier) :DD No..... for Rs..... Issuing Bank:.....Dated:.....

19. **UNDERTAKING:** I solemnly affirm that the information furnished above is true and correct in all respect. I have not concealed any information. I realise that if any information furnished herein is found to be incorrect or untrue, I shall be liable to civil/criminal prosecution and also forgo my claim to the admission/ appointment in the Institute.I am/have not been involved in any kind of criminal and unlawful activities in the past.

Date: \_\_\_\_\_  
 Place: \_\_\_\_\_  
 Signature and seal of attesting authority (Gazetted Officer) \_\_\_\_\_  
 Candidate's signature \_\_\_\_\_

**List of enclosures:** 1. Application fee Rs.1000/- (Rs.800/- for SC/ST candidates) by means of Demand Draft in favour of "The Director, AIIMS" payable at New Delhi. Name & address should be written on the back of the Demand Draft; 2. High School Certificate showing the date of birth; 3. Degree/Provisional Certificate for having passed qualifying examination; 4. Caste/Community Certificate - SC/ST/OBC-on prescribed format, if applicable. 5. 'No Objection Certificate' if in service; 6. List of Publication; 8. Any other.

**Note: Applications received on other formate or without the prescribed fee or received after the last date prescribed for submission, will not be entertained.**