ALL INDIA INSTITUTE OF MEDICAL SCIENCES

Re	eterence Advertisement No:_		Dated:_						
Su	bject: Application for First Y	'ear Junior Residency	(Non-Academic).					
1.	Name		Affin Dannard						
2.	Father's Name		Affix Passport Size						
3. Date of Birth				Photogra attested by	by				
4.	Permanent Address	<u> </u>	Gazetted	Officer					
5.	Local Address								
	With Telephone No. (if any)								
6.	. Citizenship								
7.	. Educational Qualification								
Ex	am Passed MBBS/BDS	College Institute	Year of Pass	ing	Max.Marks Obtained				
8.	Name of College / Institute								
9.	Whether SC/ST/OBC with	documentary evidence	e						
10	Date of Completion of Inter	nship							
11	. Percentage of Aggregate n	narks in all Profession	al Examinations						
12	. Subject in Order of Prefere	nce							
a)_		_ b)	c)						

13. Perma	anent M.C.I./D.M.C. Reg	istration No.:							
14. Whe	ther appeared in AIIMS I	P.G. Entrance Ex	amination held o	n 11 th May.,2008, Yes / No.					
If yes indicate Roll NoTot			otal marks/percentage obtained						
	her done any First Year nention the department/	,	(Non-Academic)	at AIIMS or Outside,					
S.No	Subject	From	То	Organization/Institution					
1									
2									
3									
4									
PLEASE	NOTE:								
1. In	complete applications w	ill be rejected Stra	aight way <u>.</u>						
2. If it is found, that the applicant has suppressed any information or given wrong information hi/her Junior Residency (Non-Academic) will be terminated forthwith without assigning any reason.									
	e Junior Residents (Non- leave for every complete		ntitled to 15 days	leave during six months at the rate	of				
<u>DECLARATION</u>									
	do hereby declare that e and I shall abide by the			is true and correct to the best of r S.	ny				
DATE:			SIGNATURE	SIGNATURE OF THE APPLICANT					
N.B: Please affix the following with the application form:									

One recent Passport size Photograph.(Space Provided)
 Attested copies of all the certificates/testimonials.