# APPLICATION FORM FOR ENGAGEMENT OF TEACHING FACULTY ON CONTRACTUAL BASIS IN ESIC MEDICAL COLLEGE & PGIMSR, RAJAJINAGAR, BANGALORE-10

1.	(a) Post applied for	:			Affix self-attested recent passport size
	(b) Specialty applied for	:			photograph here (photograph
2.	Name in full (in block letters)	:			should be firmly pasted on
4.	Father's / Husband's Name	:			this page and not stapled.
5.	(a) Date of Birth (in figures) (in words)	:			
	(b) Age as on Date of interview	:			
6.	(a) Religion	:			
	(b) Nationality	:			
7.	Mailing address	:			
8.	(a) e.mail [To be mandatory]	:			
	(b) Contact Number		Phone:	Mobile	:
	(c) Aadhar No.				
9.	Permanent Address	:			
10.	Gender (write 1 for Male, 2 for Female, 3 for Transgender)	:			
11.(i)	(a) If Person With Disability (PWD)	:	Yes/No		_
	(b) Percentage of Disability	:			
(ii)	Whether Ex-Serviceman/Retired Govt. employees	:	Yes/No		_
(iii)	Whether ESIC / Govt. Employees	:	Yes/No		_
12.	Community / Category	:			

## 13. ESSENTIAL EDUCATIONAL AND PROFESSIONAL QUALIFICATIONS

(Attach annexure, if necessary).

Name & Address of College	University		Duration	Degree/ Examinatio n Passed	Subjects	Percentage of marks
		From	From to			obtained

# ...03...

## 14. DETAILS OF EMPLOYMENT (IN CHRONOLOGICAL ORDER)

(If necessary, attach annexure)

S1. no.	Name & Address of the Institution	Designation	From	То	Total Period	Whether experience recognized from MCI/DCI (write 'Yes' or 'No')

....04....

15.

# DETAILS OF RESEARCH PUBLICATIONS

#### (PLEASE DO NOT INCLUDE CASE REPORTS & REVIEW ARTICLES)

S1.		Year of	Status of	Journal			Remarks		
no.	Inte of Original Article	Publication Authorshi	Authorship	Name of the Jour	Indexed in	National Yes / No	Society Yes / No	International Yes / No	Eligible/Not Eligible
				nal					

#### **16.** Training.

Institution	Period	Field of Training

**17.**Academic achievements and activities

(Attach annexure, if necessary).

#### **18.**List of enclosures:

(i)	(ii)
(iii)	(iv)
(v)	(vi)
(vii)	(viii)
(ix)	(x)

I hereby declare that all the statements made in this application are true, complete and correct to the best of my knowledge and belief.

I understand that in the event of any information being found false or incorrect at any stage, my candidature/appointment shall be liable to be cancelled / terminated summarily without notice or any compensation in lieu thereof.

I also affirm that No Objection Certificate from the present employer for applying for this post has been obtained.

Place

Date \_\_\_\_\_

Signature of the Candidate