Government Medical College, Parbhani

To,

 Dean,

 Government Medical College,

 Parbhani.

Subject:-Application for the post of Senior Resident (On Temporary basis-180 days)

Name:-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail ID\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Adhar Card No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_Pan Card No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PIN\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Appling for Post & Subject:-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Category:-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cast Certificate Yes/No. Validity-Yes/No

Non-Creamy Layer Yes/No

MMC/MCI Registration Yes/No

Date of Birth:- / /2024 age as on / /2024 \_\_\_Year\_\_\_Month\_\_\_Days

Name of the MBBS College/Institute:-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the MD/MS/DNB College/Institute\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the DM/MCH/DNB(SS)College/Institute:-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | 1st year | 2nd year | 3rd year(Part I) | 3rd year (Part II) |
| MBBS Marks |  |  |  |  |
| MD/MS/DNB |  |
| DM/MCH/DNB(SS) |  |

No of Attempt:

|  |  |
| --- | --- |
| MBBS Marks |  |
| MD/MS/DNB |  |
| DM/MCH/DNB(SS) |  |

Bond information- (bonded/non-bonded/bond completed)

 Yours faithfully

Government Medical College, Parbhani

To,

Dean,

Government Medical College,

Parbhani.

Subject:-Application for the post of Assistant Professor, (On Temporary basis /

 Contract basis for 364 days)

Name:-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-mail ID\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Adhar Card No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Pan Card No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PIN\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Appling for Post & Subject:-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Category:-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cast Certificate Yes/No.Validity-Yes/No

Non-Creamy Layer Yes/No

MMC/MCI Registration Yes/No

Date of Birth:- / /2024 age as on / /2024 \_\_\_Year\_\_\_Month\_\_\_Days

Name of the MBBS College/Institute:-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the MD/MS/DNB College/Institute\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the DM/MCH/DNB(SS)College/Institute:-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

One Year S.R.Ship - Yes/No

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | 1st year | 2nd year | 3rd year(Part I) | 3rd year (Part II) |
| MBBS Marks |  |  |  |  |
| MD/MS/DNB |  |
| DM/MCH/DNB(SS) |  |

No of Attempt

|  |  |
| --- | --- |
| MBBS Marks |  |
| MD/MS/DNB |  |
| DM/MCH/DNB(SS) |  |

Bond information-(bonded/non bonded/bond completed)

Post PG Experience- year\_\_\_\_\_month\_\_\_\_\_\_\_days

(For Assistant Professor)

Name of Institute 1)\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 2)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 3)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 4)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Yours faithfully