CHACHA NEHRU BAL CHIKITSALAYA
(An Autonomous Institute under Govt. of NCT of Delhi)
Geeta Colony, Delhi - 110031

APPLICATION FORM
(PLEASE FILLED ALL THE COLUMN IN CAPITAL LETTERS)

Department & Post Applied for : _____

Paste recent self Attested Passport size photograph of candidate

1. Name : _____
2. Father's/ Husband's Name : _____
3. D.O.B.: _____
4. Gender (Please Tick): Male_____ Female_____Others_____
5. Age in Years _____ Months _____ Days_____ (As on the date of interview)
6. Nationality : _____
6. Aadhar No.: _____
7. Passport/Voter ID No. (Please specify) : _____
8. Whether SC/ST/OBC(Delhi)/DIVYANG : _____
9. Address (Permanent) : _____

   _____
10. Address for Correspondence : _____

    _____
11. Mobile No. : _____
12. Email address : In capital letters)_____
13. Current Registration No. with DMC/ Applied case I.D. No. with date :_____
14. Educational Qualification :

Name of Examination	% & division of Marks	Board/University	Month & Year of Passing	Number of Attempts
MBBS				
MD/DNB/Diploma (Subject _____)				
Any other Qualification				

17. Details of Experience (if any)

Residency	Name & Address of the Institute/ Hospital	Period of Residency	
		Adhoc Basis From/ To	Regular Basis From/ To
Junior Resident			
Senior Resident			

18. Whether any Leave encashment have been taken during the residency period as above: (Yes/ No)

If yes, No. of days _____& period of Leave encashment _____

18. Any other information you wish to submit :_____

DECLARATION

1. I hereby solemnly declare and affirm that 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/ facts being found untrue/ false/ incorrect my candidature is liable to be cancelled/ terminated besides taking any other action deemed fit in this regard. I shall have no claim for absorption after termination/ completion of contract period of tenure. I shall abide by the terms and conditions as prescribed.

1. **For Govt. Employees :** I have also informed my Head of Office/ Department in writing that I am applying for this post and shall produce "No Objection" Certificate at the time of the Interview.

Date:

Place:

(NAME AND SIGNATURE OF THE APPLICANT)