## **ANNEXURE-A**



## DAMODAR VALLEY CORPORATION <u>APPLICATION FOR THE POST OF GDMO</u> <u>ON CONTRACT BASIS</u>

## TO BE PRODUCED AT THE TIME OF WALK-IN-INTERVIEW

Paste yourrecent pass port size (size 3.5 x 3.5cm) photograph (not older than three months) duly selfattested

1. Employment Notification No.:	PLR- Medical(Contractual)/80/GDMO/2023/02 Date:25/02/2023
2. Name of the Post & Post No.:	GDMO (Contractual), Post No.2023/C03
3. Name of the Applicant in Full:	
(In Block Letter & as appearing in Class Xth Certificate)	3
4. Father's/Spouse's Name :	
<ul><li>5. Date of Birth:</li><li>6. Gender (Pls. put a tick) :</li></ul>	D D M M Y Y Y Y  Male Female Others
7. Category (Pls. put a tick):	UR OBC SC ST EWS PWBD Ex-SM
8. Whether PWD (Yes/No), If Yes	Type of Disability:
9. Email ID: (In the capital letters	
10. Mobile No.:	Alternate Mob No:
11. Correspondence Address:	
House No. /Street name	
P.O	City/Town
District	State
Pin Code	Nearest Railway Station Page 7 of 9

12. Permanent Address:		
House No./Street name		
P.O	City/Town	
District	State	Pin Code
Landline No.(if any)		
13. Marital Status	:	_
14. Nationality	:	
15. Qualifications:		

SI. No.	Name of the Exam	Name of the Board /Medical College/ University	Whether Full Time Regular Course (Please state YES or NO)	Major Subjects taken/ Specialization	Year of Passing	% marks in aggregate (not to be rounded off)
1.	Class X					
2.	Class XII					
3.	MBBS					
4.						
5.						

Medical Council Registration No.: -----

## 16. Experience Details:

SI. No.	Post/ Designation Held	Name of the Hospital/ Nursing Home/ Organization	Period of Work		Nature of Duties
		Organization	FROM	то	
1.					
2.					
3.					
4.					

17. Visible marks of identification (Mole marks/Wound/Scar/Burn etc,):
18. Is there any Disciplinary/Criminal/Civil/Vigilance proceeding pending against you?
If yes, give the details:
Note: Add extra sheets if required.
<u>DECLARATION</u>
I hereby declare that all the particulars furnished above in this application are true and correct to the best of my knowledge and belief. In case any information given in this application being found false, incomplete, incorrect or concealing the fact, my candidature may be cancelled at any stage without any notice and without assigning any reason thereof even after joining.
Place:
Date:
(Signature of the Applicant)
(Name of the Applicant)