

LADY HARDINGE MEDICAL COLLEGE & ASSOCIATED HOSPITALS, NEW DELHI

Application form for the post of Senior Resident in the Department of _____

Affix passport Size photograph Attested by Gazetted officer

1. Name in full (capital letters) :
2. Sex :
3. Age & Date of Birth :
4. Category (SC/ST/OBC/ GEN) :
5. PWD : Yes /No , If Yes tick OL/OA/HH
6. Religion :
7. Nationality :
8. Address for communication (in capital) :
9. Permanent Address :
10. Mobile No. & E-mail :
11. Particulars of exam passed (MBBS Onwards)

Name of Examination	Class/Division	Year of Passing	Institute/College attended	University

12. Whether obtained any position in the university, if so, a copy of the attested certificate to be enclosed:
13. Prize /Medals /Publications /Conference Attended etc, if any (copies of attested certificate to be enclosed):
14. Extra-Curricular activities, if any (copies of attested certificate to be enclosed)
15. Experience after MBBS :
16. Experience after PG :
17. Whether at present employed, if so, details of employment and date of joining etc. to be mentioned :

Name of employer	Designation	Pay Scale	Nature of duties	Period of stay		Last pay drawn	Reason for leaving
				From	to		

18. Medical Registration Number & Place of Registration :
19. Any other information :
20. Date of PG Completion :
21. Demand draft No _____ dated _____ for Rs _____

DECLARATION: I solemnly declare that the above statements made by me are correct to the best of knowledge and belief.

Signature of Candidate

Endorsement of the Employer

Certified that Dr _____ holds a post in this Department /Institution/organization _____. I have no objection to his/her application being consideration for the post of Senior Resident.

Name & Signature (Designation with stamp)

List of enclosures:

Please Tick

- | | |
|--|-----|
| 1. 10 th Certificate for Age Proof | () |
| 2. Mark Sheets of MBBS Part I, II & final year | () |
| 3. Internship Completion Certificate | () |
| 4. D.M.C./D.D.C. Registration Certificate with PG Qualified | () |
| 5. M.B.B.S. Attempt Certificate | () |
| 6. M.S./M.D. Attempt Certificate | () |
| 7. M.B.B.S. Degree | () |
| 8. M.S./M.D. Degree/ Provisional Pass Certificate from University | () |
| 9. Prize/ Medal/ Distinction during Under-Graduate & Post-Graduate | () |
| 10. Publication | () |
| 11. Proof of Presenting Paper in Conference | () |
| 12. Demand Draft Rs. 500/- or Rs. 300/- | () |
| 13. Cast/ Community/ Disability Certificate (if applicable) | () |

Signature of Candidate