APPLICATION FORM

Арр	Please read the instruction	s carefully before filing the	Form)		AFFIX PASSPORT SIZE PHOTO DULY SIGNED
1	Name in Full (Mr./Ms.)				
2	Date of Birth (DD/MM/YYYY)		Age as on 01.0	5.2014 :	
3	Category (retain / (✓) the one applicable)	SC / ST / OBC / PWD /	EX SERV	ICEMEN / GI	ENERAL
	Religion				
4	Address for Correspondence with Pin Code				
	Nearest Railway Station				
	Telephone No/Mobile	Tel.no.	N	lob. No.	
5	Permanent Address		I		
	Domicile state		Te	el. No.	
6	E-mail		I.		

7. QUALIFICATIONS (starting from SSC)

SI. No.	Qual.	Branch	University / Board	Duration of the course	Whether Govt. recognized College / Univ. recognized by UGC	Whether regular and full time (Yes / No)	Year of Passing	% of Marks
							_	

8.	REGISTRATION	: No. and D	ate							
	Name of the State and the Medical Council where Regn. is done									
9. AI	RTICLES, IF AN		HED:	I				I		
	DETAILS OF EXI	PERIENCE:								
SI. No.	Name of the Organization			To (please mention exact date)	Total experience (years, months, days)	Employer Whether Private/ Govt./PSU	Total Emoluments (Gross) Per Month	Please mention experience (Trainee/ Regular)		
Note -	- Please attach a s	separate she	et narrating th	ne details of jo	obs and respor	nsibilities handl	ed if required.			
11. TOTAL EXPERIENCE: TOTAL EXPERIENCE AFTER ACQUIRING <u>YEARS</u> <u>MONTHS</u> <u>DAYS</u>										
MINIMUM PRESCRIBED QUALIFICATION (excluding private practice and internship period)				<u>- EARO</u>	10000	<u></u>	57.13			
PRESENT PAY SCALE/GROSS PAY				Pay Scale:						
PRESE	NT DESIGNATION			Rs. :		Per	Month			
	OF ENTRY IN THE		AY SCALE							
HOW	OINING TIME / SOON CAI RED APPOINTI		JOIN IF							

IF YES, APPLICATION	DATE/MONTH	OF						
POST APPLIED	FOR							
	II the information t to be false I will ma	_				any of t	the detail	s give
Date: Place:			Signatu	re of the Cand	didate			

13. WHETHER APPLIED FOR ANY POST IN RCF EARLIER: YES/NO

INSTRUCTIONS

- 1. AFFIX PASSPORT SIZE PHOTO DULY SIGNED.
- 2. FILL THE FORM IN CAPITAL LETTERS ONLY.
- 3. GIVE THE TRUE, COMPLETE AND CORRECT INFORMATION IN THE APPLICATION FORM. IN CASE THE INFORMATION IS FOUND TO BE FALSE OR INCORRECT, THE CANDIDATE WILL NOT BE CONSIDERED FOR INTERVIEW.
- 4. ENCLOSE ATTESTED COPIES OF CERTIFICATES / DOCUMENTS IN SUPPORT OF INFORMATION GIVEN IN THE APPLICATION REGARDING AGE, QUALIFICATIONS, EXPERIENCE, CATEGORY / CASTE (IF APPLICABLE).
- 5. SEND THE APPLICATION IN AN ENVELOPE SUPER-SCRIBING "NAME OF THE POST APPLIED FOR"
- 6. IMPORTANT
 - (a) ENSURE IN YOUR OWN INTEREST THAT YOU FULFILL THE ELIGIBILITY CRITERIA.
 - (b) RAIL/ROAD FARE SHALL NOT BE REIMBURSED TO OUTSTATION CANDIDATES NOT ELIGIBLE FOR INTERVIEW AND ALSO TO CANDIDATES NOT HAVING PROPER TICKET.
 - (c) IN SUPPORT OF EXPERIENCE YOU ARE REQUIRED TO ATTACH SERVICE CERTIFICATE, APPOINTMENT LETTER, RELIEVING LETTER, CURRENT PAYSLIP, ETC.
