

Baba Farid University of Health Sciences, Faridkot
 Sadiq Road Faridkot – 151203 (Pb) India
Application Form

Advt.No. 9/2013

Last date : 21.8.2013

Details of Application fee
 DD No. Date and Amount

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Affix recent
 Passport size
 Photograph

Note: 1. **Incomplete applications are liable to be rejected.**

1. Application for the post of _____ in _____
 (Subject/Specialty)

2. Applicant's Name (IN BLOCK LETTERS)

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3. Father's Name (IN BLOCK LETTERS)

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4. i) Date of Birth of Applicant
 (attach proof)

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DAY

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MONTH

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YEAR

ii) Age: (as on last date for
 Receipt of application)

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YEARS

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MONTHS

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DAYS

5. Write in the box **ONLY ONE** category out of SC/ST/BC/GEN
 To which you belong (attach proof if SC/ST/BC):

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6. Nationality: _____ 7. Religion _____ 8. Marital Status: _____

9. Sex (M/F) _____

10. Educational/Academic Qualification: (attach attested copies DMC & Degree certificates)

Examination Passed	Year of passing	Max. marks	Marks obtained	%	University/Institution

11. No. of papers published : National International

12. Details of prizes, Medals, Scholarships & National/ International Awards and Additional Qualification such as membership of scientific Society etc.

13. Chronological details of upto date appointments after obtaining qualification (attach experience certificate):

Post held	From	To	Total period	Employer's address/Institution

14. Whether passed Punjabi up to Matriculation ----- (Y/N) attach copy of proof.

15. Registration No. ----- (Punjab Medical Council/MCI)

16. Permanent Address						17. Correspondence Address					
Pin Code						Pin					
Ph. No.						Ph. No.					

E-mail:

18. Details of enclosures attached: 1. _____ 2. _____ 3. _____
4. _____ 5. _____ 6. _____ 7. _____ 8. _____

I hereby declare that I am Indian National and all 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 being found false or incorrect, my appointment will be liable to be terminated without any reason or prior notice. I also understand that in case of my final selection, my appointment will be provisional subject to satisfactory police verification.

Date: _____
Place: _____

Signature of the applicant

CERTIFICATE BY THE PRESENT EMPLOYER
(In case of candidate who is already in service)
No. _____ Date _____

Forwarded with the remarks that there is no objection to the selection/appointment of Sh./Ms./ _____ to the post applied for at BFUHS, Faridkot.

Signature of the employer with
Office Stamp & date