Tel.: 01639-256232, 256236, <u>E-mail:generalinfo@bfuhs.ac.in</u> Fax: 01639-256234

Baba Farid University of Health Sciences, Faridkot

Sadiq Road Faridkot – 151203 (Pb) India

Application form

Last Date: 06.05.2022

		f Appl Date ar														Pa	ffix and a second	rt si	ze		
Note:	:	1. In	com	plete	appli	icatio	ns ar	re lial	ole to	be re	jecte	d.									
1	١.	Annl	icatio	on for	the r	nost o	f Da	ta Er	itry O	nera	tor &	& Res	searcl	h Ass	istan	t und	ler D	HR i	in Nei	ırolog	 ov
-	•			ent in						peru									11 110	,	<u></u>
2	2.	Appl	icant	's Na	me (I	IN BI	OCK	LET	TERS	S) as j	per ac		bject/; nic red		alty)						
			1					1	1		1	I			1		I		1	1	1
			·								_	_	1				I .	I			ļ
3	3.	Fath	er's l	Name	(IN I	3LOC	CK LI	ETTE	RS) a	s per	acade	emic i	record	l							
]
		4. i)) Dat	te of E	Birth	of Ap	plica	nt													1
			(att	ach pr	oof)							D	AY		N	MON'	TH	•	YE	AR	
		ii)	Age	: (as c	on 01	.05.20	022)														
												YE	EARS		N	MON	THS		DA	YS	
5	5.	Cate	egory						_Sub (Categ	ory					_(atta	ch pr	oof)			
ϵ	ó.	Natio	onali	ty:			7. R	eligio	on			8. N	Marita	1 Stat	us;			9.	Sex		
1	Λ			•				_													
Exan	iin	Educa nation	ation			assing	g l	Mark	s obta			rcenta		CIUII			temp			tution	
Passe	d						1	Max 1	narks										Name	2	
														·							7
]	11	. No.		ipers p			1	Natio	nal					Inte	ernati	onal					
		-		-		J															_
Pleas Sr. No.]	use se Name resear	of ch	te she	Au	thor /2 nd /3 ^r	rd		ame o			ndex/ Ion in			te of		icatio	on/	w a	lication	
	1 :	article																	repo	ort	

- 12. Details of prizes, Medlas, 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):

	From	То	Total period	Date of PG recognitio	n Employer's address
				in concerned subject*	
s information !	e evelleble	on the N	IMC wahaita an	"College and Course See	 rch" under "Information Desk
NB Candidates	must attac	h proof o	of institution reco	ognition from NBE.	
() G . 1"	N N	10.7		11.1.4	
			ing Council with	which the	
applical	it is registe	acu (alla	cii pi001)		
(b) Registrat	tion Numb	er	:		
. Punjabi upto	Matric star	ndard (Y	/N) :		
6. Permanent	Address			17. Correspond	lence Address
					** ** *****
			 		
	Pin Co	de		E-mail	Pin Code
				Mobile No-	
E-mail: Mobile No-					
Aobile No-					
Aobile No-	of enclosur	es attach	ed:	2	3
18. Details of					
18. Details of 4		5	6	7	8
18. Details of 4	I am Ind	5ian Natio	6 onal and all stat	7	8lication are true, complete a
18. Details of 4	I am Ind	5ian Natio	6 onal and all stat belief. I understa	77	888ication are true, complete a y information being found fa
18. Details of 4oy declare that to the best of a rrect, my appo	I am Indi	5ian National Na	6 onal and all stat belief. I understable to be termina	7	8lication are true, complete a

CERTIFICATE BY THE PRESENT EMPLOYER

Signature of the applicant

Forwarded with the remarks that here is no objection to the selection/appointment of Dr. ______to the post applied for at BFUHS, Faridkot.

Date:

Place:_

Signature of the employer with Office Stamp & date