

Application for the post of _____, S.V. Paediatric Cardiac Hospital, TTD, Tirupati.

Proforma for application for the post of _____							
1	Name of the applicant						
2	Address of the applicant(Present)						
	Address of the applicant(Permanent)						
3	Aadhar Number(Copy shall be enclosed)					Passport size Photo to be attached	
4	Mobile Number						
5	E mail address						
6	Nationality and Religion						
7	Father's name						
8	Date of Birth (copy of Certificate shall be enclosed)						
9	Educational Qualifications (copies of Certificates shall be enclosed)	Name of the Degree	Date of issue of certificate	Period of course	Name of the institution which has issued the degree (or) where the candidate studied.	Grade obtained	

10	Experience	Name of the Institution where worked	Cadre in which service was rendered	Date of joining in the service	Date of Leaving the service	Period- No. of years for which service was rendered	
11	Achievements/ Awards	Name of the Institution where recognisable service was rendered.	Cadre in which award was given.	Nature of research document / papers submitted	Field of Research	Name of the medical journal where the research papers of the candidate are published	Year of award / publication
12	A write up on experience and publications						

I _____ Son/ Daughter/ wife of _____ here by state that all the particulars mentioned above are correct and true. If any particular is found to be false or fake, at a later date, my appointment will be cancelled summarily and I will be liable for punishments if any as per rules under law.

Date :

Place:

Candidate

Signature of the

OFFICER

**Sd/-
EXECUTIVE**

//FORWARDED//

OFFICER (FAC)

CHIEF MEDICAL