

अखिल भारतीय आयुर्विज्ञान संस्थान, नागपुर

ALL INDIA INSTITUTE OF MEDICAL SCIENCES, NAGPUR



Address: Plot no.2, Sector-20, MIHAN, Nagpur—441108
Website: www.aiimsnagpur@edu.in

Application form for the post of Senior Resident

Applica	ition form No		
	fice use only)		Affix recent passport size photograph duly Self-attested
Note: In	ncomplete application is liable to be re	ejected.	
1.	Application for the post of SENIOR (Subject/Specialty)	RESIDENT in	
2.	Applicant's Name (IN BLOCK LE	TTERS) Gender:	
3.	Father's/Husband's Name (IN BL	OCK LETTERS)	
4.	i) Date of Birth of Applicant		
	(Attach Proof)	DAY MONTH	YEAR
	ii) Age: (as on the last date		
	of receipt of application)	YEARS MONTHS	DAYS
5. SC/ST/0	Write in the box ONLY ONE cated OBC/GEN to which you belong (Attac		
6.	Nationality:		
7.	Religion:	8.Marital Status:	

9. Educational/Academic/Technical/Professional Qualifications (Attach proof):-								
Examination Passed	Subject	Nam	ne of nstitution	Name o Universit	Ye f Pas ty with	ar of ssing n %of arks	No. o	
Matric								
*M.B.B.S.								
*M.D./M.S/DNB								
*DNB/M.Ch./D.M								
Candidates poss appear for interval. 10. No. of paper of the paper of	11. Details of prizes, Medals, Scholarships & National/ International Awards and Additional Qualification such as members of scientific society etc.							
Post held	From	ertificate)	То		Organiza Nam	ition/En e & Ado	•	;
13. (a) Central/State Medical Council with which the applicant is registered (attach proof) :								

14. Permanent Address	15. Correspondence Address:
Pin Code:	Pin Code:
Mobile No:	Mobile No:
E. Mail I.D.:	E. Mail I.D.:
16. Details of enclosures attached: DECLARATION to be signed by the candid	late
are true, complete and correct to the best of event of any information being found false	National and all statements made in this application my knowledge and belief. I understand that in the or incorrect, my appointment will be liable to be. I also understand that in case of my final selection, satisfactory police verification.
Date:	
Place:	(Signature of the applicant)

CHECK LIST FOR THE POST OF SENIOR RESIDENT ON REGULAR BASIS IN THE

DISCIPLINE/DEPARTMENT OF _____

(Put a cross (X) wherever applicable)

Sr. No.	Copy of the documents (<u>self -attested</u>)	Please tick (√)
01	Certificate for Date of Birth (Class X or XII Certificate)	
02	MBBS Mark Sheets (All Semester)	
03	MBBS Degree	
04	Internship completion certificate	
05	Attempt certificates	
06	MCI/DCI registration	
07	MD/MS/DNB/PG Diploma certificate	
08	SC/ST/OBC/PH certificate issued by the competent authority (if applicable)	
09	Experience (if any)	
10	No Objection Certificate (if any)	
11	Copies of any other relevant documents	

Signature of the Candidate:	
Date: _	

BIO-DATA

Name of the department	:-
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1. Applicant's Name (in **BLOCK LETTERS**):-

2. Father's Name :-

3. Date of Birth of Applicant :-

4. Educational/Academic/Technical/Professional Qualifications:-

Examination Passed	Subject	Name of College/Institution	Name of University	Year of Passing with %of Marks	No. of attempts
Matric					
*M.B.B.S.					
*M.D./M.S/DNB					
*DNB/M.Ch./D.M					

5. Chronological details of up to date appointment after obtaining postgraduate qualification (attach experience certificate)

Post held	From	То	Organization/Employer's Name & Address		
6. No. of pape	ers published:-				
National		Interna	itional		
7. Details of p					
2. Scho	olarships :				
3. Natio	onal/ International Awa	irds and additional qu	alification such as membership		
of scien	ntific societies etc.				
8. Any other i	nformation of meritorio	ous nature.			
Date:					
Place:		(Sign	nature of the applicant)		

\DECLARATION TO BE SIGNED BY OBC CANDIDATES ONLY

I		son/dau	ighter Shri			
resident of Village/ To	own/ City/ District		State		Commu	ınity
(ce	rtificate enclose	d) hereby	declare	that I	belong	to
the	community whic	ch is recogni	zed as a	backward	class by	the
Govt. of India for the	purpose of reserv	ation in serv	ices as p	er orders	contained	ni b
Department of Personn	el and Training C	Office Memora	andum No	.36012/22	2/93-Estt(S	CT)
dated 8.9.1993. It is als	o declared that I d	do not belong	to the pe	ersons/sec	tions (crea	amy
layer) mentioned in Col	umn 3 of OM No.	36012/22/93	-Estt(SCT)	dated 08	3.09.1993	and
modified vide Govt. of In	dia, Department of	Personnel ar	nd Training	g OM No.3	36033/3/20)04-
Estt(Res) dated 09.03.20	04.					
Place:		(Sid	gnature of	applican	f)	
Date:		, ,	running h	• •	•	
CERTIFICAT	ΓΕ / NO OBJECTIC	N BY THE P	RESENT E	MPLOYE	R	
(In case candidate is in G	Sovt. / Semi Govt. /	PSU/ Autonor	nous Body	service e	tc.)	
No			Date			
Forwarded with the rema	rks that there is no	objection to t	he selection	n/appointr	ment of Dr	
		to	the post a	applied for	at AIIMS	,
Nagpur						
Date:		Signature Stamp	of the em	ıployer wi	th Office	

FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES APPLYING FOR APPOINTMENT TO POST UNDER THE GOVERNMENT OF INDIA

This is to certify that	Shri / Smt. / Kum*			son / c	daughter of
shri	of	village /	town		in
District		in		_state	belongs
	community which is rec	ognised as a	backward class u	ınder :-	
Section 1, No.186 dated 13th (2) Resolution No.12011/9/No.163, dated 20th October 19 (3) Resolution No.12011/7/dated 25th May 1995. (4) Resolution No.12011/44 No.210, dated 11th December (5) Resolution No.12011/68 (6) Resolution No.12011/12 (7) Resolution No.12011/12 (7) Resolution No.12011/13 (9) Resolution No.12011/13 (9) Resolution No.12011/14 (10) Resolution No.12011/68 (11) Resolution No.12011/68 (12) Resolution No.12011/88	94-BCC dated 19th October 19 994. 95-BCC, dated 24th May, 1995 /96-BCC, dated 6th December	94, published in ta 5, published in Ga 1996, published in of India - Extrao of India - Extrao	he Gazette of India - Extraor n Gazette of India - Extraor n Gazette of India - Extraor rdinary - No.129, dated rdinary - No.236, dated rdinary - No.239, dated rdinary - No.166, dated rdinary - No.171, dated rdinary - No.241, dated rdinary - No.270, dated	Extraordinary - part 1, Sector attraordinary - part 1, Sector attraordinary - part 1, d the 8th July 1997. d the 1st Sept 1997. d the 11th Dec 1997. d the 3rd Dec 1997. d the 3rd Aug 1998. d the 6th Aug 1998. d the 27th Oct 1999. d the 6th Dec 1999.	ion 1, No.88, Section 1,
thehe/she does not belong to Government of India,	District of the the persons/sections (Crange of Personne	reamy Layer)	State mentioned in colu OM NO.36012/	e. This is also to rumn 3 (of the Sch /22/93 - Estt (S	certify that nedule to the SCT), dated
Place :			Signature		
Dated :			District Ma	agistrate/Dy. Co	mmissioner etc
*Strike out whichever is	not applicable			(Wi	ith seal of office
NB: (a) The term 'ordina People's Act., 1950.	rily' used here will have t	he same mean	ing as in section 20	0 of the Represer	ntation of
	to issue OBC caste certif				The
(i) District Magistrate Commissioner / Deputy	/ Additional Magistrate Collector / 1st class Sti Magistrate / Extra Assistar	e / Collector ipendiary Mag	/ Deputy Commi	ivisional Magistı	rate / Taluk

- (ii) Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate.
- (iii) Revenue Officer not below the rank of Tahasildar, and

Magistrate).

(iv) Sub-Divisional Officer of the area where the Candidate and or his family resides.