

**APPLICATION FORM**

**(Appointment of Contractual Doctors / Specialists under DMF, Angul)**

Post applied for :		Affix / Paste your recent Passport size Colour Photograph here				
1. Name of the Candidate: (IN CAPITAL LETTERS)						
2. Fathers/Husband Name:						
3. Age (Not above 70 years) Date of Birth:	4. District of Domicile:	5. Sex:				
6. Please mention if SC/ST/OBC/General:						
7. Present Contact Address:				8. Permanent Telephone No: (STD Code) Number		
Permanent Contact Address:				9. Present Telephone No: (STD Code) Office Number		
10. Email Address :				11. Mobile No:		
12. Language Spoken/written:						
13. Education : Odiya Pass Certificate/High School onwards , please list all your qualifications						
Degree	Institute/Board & Location	Year	Mark			Full/Part Time/ Distance Learning
			Full Mark	Marks Secured	%	
Matriculation						
MBBS						
P.G (Specialisation)- Pl. mention-						
Other (Additional row may be added)						

14. Odisha Council of Medical Registration No, Date & Validity:		
15. Employment record:		
Total Years of post qualification experience:		
Years of experience in Government:		
16. Details of Employment: (Use separate sheets if required).		
Starting with your present employment, list in reverse order all the employments you have had.		
16 A. Current Employment:		
From Month/ Year	To Month/ Year	Designation
Location of Employment:		
Description of your duties:		
Current salary drawn	Rs. .... /Pm	
16 B. Previous Employment :		
From Month/ Year	To Month/ Year	Designation
Location of Employment:		
Description of your duties:		
Per month Salary Drawn: Rs.....		
Expected Remuneration (INR/Per Month):	Rs. :...../- PM (In words :.....)	
<b>DECLARATION</b>		
I do hereby declare that the information furnished above are true to the best of my knowledge and belief and if at any stage, it is found that any of the material/ information is false/incorrect or is suppressed by me, my candidature/appointment under DMF Trust is liable to be rejected/ terminated. I also declare that, I have never been disengaged under Health & F.W. Deptt., Govt. of Odisha on administrative ground for disobedience/poor performance/misbehaviour/criminal activities etc.		
Date:		
Place:		Signature of the Applicant