



**JANAKPURI SUPER SPECIALITY HOSPITAL SOCIETY
(AN AUTONOMOUS INSTITUTE)
UNDER GOVT. OF NCT OF DELHI
C-2B, JANAKPURI, NEW DELHI - 110058**

Website: www.jsshs.org / Website: www.health.delhigovt.nic.in
Email: janakpurijssh@yahoo.com Contact us: 011-28504100

APPLICATION FORM FOR TEACHING FACULTY

Affix a passport
size photograph

Advt. No. :- _____

1. Application for the Post of: _____ in the
department of _____

2. Name of the Applicant _____

Details of Demand Draft/Online Payment		Tick the Applicable Category
DD No/Transaction ID No.:		UR / SC / ST / OBC(Delhi)
Amount:		(Enclose proof of Caste Certificate issued by Competent Authority)
Dated:		
Name of the Bank:		

3. Father's/Mother's Name : _____

4. Spouse Name : _____

5. Date of Birth : _____

6. Age as on 30.11.2019:

--	--	--

Years Months Days

7. Present Address: _____

Telephone/ Mobile No. _____ E-mail: _____

8. Permanent Address: _____

Telephone/ Mobile No. _____ E-mail: _____

9. Nationality: _____

10. Permanent MCI / State Medical Council Registration No. & Place of Registration:

MBBS:

MD/MS/DNB:

DM/M.Ch/DNB: State Medical Council Registration No:

11. Details of Educational Qualifications:

Name of Examination	Maximum Marks	Marks Obtained	% of Marks	Month/Year of Passing	College & University
Total of all MBBS Exams					
MD/MS/DNB					
DM/MCh/DNB					
Any Other					

12. Thesis / Dissertation Title where applicable: _____

13. National/ International conferences/ seminars etc. Attended and the title of papers presented during last 3years, if any. (Use separate sheet if space is inadequate)

14. Membership of National and International Bodies :-

(a) National:

(b) International:

15. Details of postgraduate work/publications. (Give the list on separate sheets): Published papers should have statement about **indexed, impact factor of journal & citation of paper.**

List of publications has to be classified as: (Vancouver format only)

15.1 Publication as First Author in indexed journals.

15.2 Publication as Co-author in indexed journals

15.3 Papers in Books, Proceedings & non indexed journals.

16. Total Research Experience with details in each area:

17. Major academic/ other achievements:

18. Awards and Prizes received: (Name of Awards/ Fellowships, year awarded by)

19. Current Activities & Area of Interest:

20. **Experience:** Experience certificate (to be attached) issued by the competent authority clearly indicating dates (from and to) stating the nature of the job and required details. (Particulars of Employments held should be given in chronological order):

SI. No.	Name of the Employer and Address	Post Held	From	To	Nature of work performed or being performed

(Use separate sheet if space is inadequate)

21. The following additional information may be provided as per format given below for the post along with your application:

Extramural Research Funding Received:

1. R&D (Govt. Agencies)

S. No.	Title of Project & duration	Funding Agencies	Level of Participation whether PI./Co-PI.Others

2. Non R&D (Sponsored / Commercial):

S. No.	Title of Project & duration	Funding Agencies	Level of Participation whether PI./Co-PI.Others

22. Are you being considered for any appointment elsewhere? If so please give details:

23. If selected, the period required to join the post: _____

24. References:

(These should be persons resident of India and holders of responsible position. They should be intimately acquainted with the applicant's character and work, but must not be relatives. Where the candidate has been in employment, he/she would either give his/her present or most recent employer or immediate superior as a reference or produce testimonials from him in regard to the candidate's suitability for the post which he/she is an applicant).

SL. No.	Name	Occupation or Position	Address & Contact No.	Email Address
1				
2				
3				

25. Any other information you wish to add :

26. Check List: (Please tick in the box given below **as proof of enclosures**. All Certificates must be self-attested and be attached in the following order :

(i) Certificate in support of age (10th)

(ii) Mark Sheets of MBBS (I, II & Final years).

(iii) Degree of MBBS.

(iv) MD/MS/DNB/M.Phil/ PhD.

(v) DM/M.Ch /DNB (Super Speciality).

(vi) Registration with MCI/ Delhi Medical Council (Mandatory).

(vii) SC/ST/OBC (Delhi) certificate in prescribed format of Govt. of India

(viii) Experience Certificate(s).

(ix) No Objection Certificate (if the candidate is already in Service).

(x) Documentary Proof of the information furnished from S.No.12 to 18.

(xi) Copies of best five publications

(xii) Application form & other documents as single file in soft copy i.e. CD/DVD

DECLARATION

1. I hereby declare that the entries in this form and the additional particulars, if any, furnished herewith are true to the best of my knowledge and belief.
2. I have informed my Head of Office/Department in writing that I am applying for this post and shall produce "No Objection" certificate at the time of the Interview.

Place:

Date:

(Signature of the Applicant)

Candidate Full Name: