

अखिल भारतीय आयुर्विज्ञान संस्थान नागपुर ALL INDIA INSTITUTE OF MEDICAL SCIENCES, NAGPUR



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PHOTOGRAPH

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

No.AIIMS/NGP/Admin I/Faculty/2020/01

Issuing Bank	Demand Draft No.	Date	Amount

NOTE:

1. TO AVOID ANY MIS-REPRESENTATION OR INTERPRETATION OF FACTS, THE APPLICATION MUST BE SENT DULY 'TYPED', SUPPORTED WITH ATTESTED COPIES OF TESTIMONIALS.

2. <u>BRIEF OF CANDIDATE TO BE SUBMITTED</u> <u>AS PER ANNEXURE – I</u>

Application for the Post of Discipline

I. <u>CANDIDATE DETAILS</u>

1	Full Name (BLOCK LETTERS	
	as given in the Birth certificate)	
2	Father's Name	
3	Mailing Address	
4	Mobile No	
5	Telephone No.	
6	Email address	
7	Aadhar No	
8	Permanent Address	

9	Date of Birth (dd/mm/yyyy)			
10	Age (as on 17.03.2020)	Years	Months	Days
11	Gender			
12	Marital Status			
13	Whether Orthopedic Physically			
	Handicapped (OPH) (Yes/No)			
	Attach attested copy of			
	certificate on the proforma			
14	Percentage of disability			
15	Category under which applied			
	(UR/SC/ST/OBC/EWS)			
16	State of Domicile			
15				
17	Nationality			
18	Religion			

II. <u>EDUCATIONAL QUALIFICATIONS</u>:

(Please attach attested copies of certificates/degrees in support of your qualifications)

(a) <u>Undergraduate Career</u>

Examination Passed	Year of Passing	No. of attempts	Class/Division	University/ Institution	Medical Council Registration No.
Matric/S.S.C.					
Intermediate/ HSC					
B.Sc					
M.B.B.S					

(b) **Postgraduate Career**:

Examination Passed	Year of Passing	No. of attempts	Class/Division	University/ Institution
M.D./M.S.				
M.Sc.				
D.M/M.Ch.*				
D.N.B.				
Ph.D.				

* Must indicate No. of years of the course (2yrs/3yrs/5yrs) and name of the Institute with full address.

III.

III.TEACHING/RESEARCHEXPERIENCE:(Please attach attested copies of experience Certificates)

After obtaining Postgraduate/Super Specialty/Ph.D. Qualification including present employment:

GLN	Post held (indicate	rerio		Total period			Employer's	
Sl.No.	Temporary/ Permanent)	From	То	Yrs.	Mths.	Days	Pay Scale	Address
1.								
2.								
			Total					

IV. <u>ACHIEVEMENTS:</u>

1	Details of Prizes, Medals, Scholarships & National / International Awards etc.	
2	Additional qualification such as Membership of Scientific Society etc.	
3	Research Experience, if any, together with details of published works in indexed journals.	
4	Details of Research projects with extramural funding	
5	No. of Papers presented at National conference	
6	No. of Papers presented at International conference	
7	No. of Papers published (Original articles/Review articles)	
7a	Indexed	
7b	Non-Indexed	
8	No. of Papers accepted for publication(Original articles/Review articles)	
9	No. of Chapter in books/books edited	
10	If Selected, what notice period would you require before joining	
11	Have you been outside India for Academic Purpose? If so, give following information:	

13a) Please provide a list of all your scientific publications in chronological order providing details of articles including whether Original article/review/case report, indexed / non-indexed, impact factor and number of citations for the articles:

SI. No.	Particulars of Article (In Vancouver format)	Туре	Indexed in	Impact Factor of the Journal	Citations

13b) Please provide a list of all your chapters in books/ books edited in chronological order:

SI. No.	Particulars of Chapter/ Book (in Vancouver format)

14. State the foreign languages you know:

No.	Foreign Language	Can read	Can write	Can speak
(i)				
(ii)				
(iii)				

15. Give below the full details of the names/particulars of two referees from your specialty who are in a position to testify from personal knowledge to your fitness for the post.

Note:

i. You should have worked with one of the referees for at least two years.

ii. They must not be related to you

NAME	STATUS	ADDRESS

I attach attested copies of certificates/degrees in support of age, category, qualification and experience etc. as per list enclosed **Annexure-III.**

Date:

Signature of the candidate

Place:

NOTE:

- 1. INCOMPLETE APPLICATION AND THE APPLICATION RECEIVED WITHOUT DEMAND DRAFT OF THE REQUIRED AMOUNT WILL NOT BE CONSIDERED.
- 2. SUBMIT ALONG WITH APPLICATION, ONE ATTESTED PHOTOCOPIES OF DOCUMENT REFERRED AT POINT NO.2 OF GENERAL CONDITIONS PUBLISHED IN WEBSITE ADVERTISEMENT.

DECLARATION BY THE CANDIDATE

(Post applied for ______ of _____ Discipline at AIIMS, Nagpur).

I hereby declare that the above information is true, complete and correct to the best of my knowledge and belief. I have not suppressed any material, fact or factual information. I understand that my candidature is liable to be rejected in the event of any misstatement/discrepancy in the particulars being detected and after my appointment in such an event, my services are liable to be terminated without any notice to me or reasons thereof I am not aware of any circumstance which might impair my fitness for employment under the Government on regular basis.

Date:

Signature of the candidate

Place:

Annexure- III

LIST OF ENCLOSURES

S.No	Particulars of enclosures	Attached (Yes/No)
1.	Birth Certificate	
2.	Matriculation Certificate	
3.	Mark sheets of MBBS/M.Sc for all years	
4.	MBBS Degree Certificate	
5.	M.D/M.S./DNB/M.Sc Degree Certificate	
6.	D.M./M Ch. Degree Certificate	
7.	Experience Certificate(s)	
8.	Community Certificate (SC,ST / OBC (Non- Creamy Layer)	
9	Income and Asset certificate in case of EWS candidates	
10	Registration & Additional Registration with Medical Council Certificate	
11.	Disability Certificate	
12.	Any other relevant certificate(s)	

Candidates already employed in Central/State Govt./Autonomous Institutions / Statutory Organizations/ PSUs under Central/ State Govt. should get the following endorsement signed by their present employer (appointing authority).

NO OBJECTION CERTIFICATE

1.	Certified that	holds a post of	for the period from		
	till date	on regular basis in	Department. I have no		
	objection to his/her application being considered for the post of in				
	the department of	in AIIMS, Nagpur	r. In the event of his / her		
	selection to the post, he / she will be relieved from the duty to take up the post of				
		in AIIMS, Nagpur.			

 Certified that he/she submitted his/her application to the Department /Office/ Institution/Organization on ______ for onward transmission to AIIMS, Nagpur -440003.

No	Signature
Dated	_ Designation
	(Seal with Name & Designation)

Office Stamp

DECLARATION TO BE SIGNED BY OBC CANDIDATES ONLY

Place:

(Signature of applicant)

Date: (In running handwriting)

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. / K	lum*	son / daughter				
of shri	of village / tow	vn in				
District in		statebelongs				
to community wh	ich is recognised as a b	in				
toconnicting with	ien is recognised as a o					
(1) Resolution No.12011/68/93-BCC© dated 10th September 1993, published in the Gazette of India - Extraordinary -part 1, Section 1, No.186 dated 13th September 1993.						
(2) Resolution No.12011/9/94-BCC dated – part1, Section 1, No.163, dated 20th Oct		hed in the Gazette of India - Extraordinary				
(3) Resolution No.12011/7/95-BCC, dated 1, Section 1, No.88, dated 25th May 1995.		ed in Gazette of India - Extraordinary - part				
	ed 6th December 1996, pul	blished in Gazette of India - Extraordinary				
(5) Resolution No.12011/68/93-BCC, pul July 1997.	blished in Gazette of India	a - Extraordinary - No.129, dated the 8th				
	blished in Gazette of Indi	a - Extraordinary - No.164, dated the 1st				
	olished in Gazette of India	a - Extraordinary - No.236, dated the 11th				
	blished in Gazette of India	a - Extraordinary - No.239, dated the 3rd				
	blished in Gazette of India	a - Extraordinary - No.166, dated the 3rd				
	ublished in Gazette of Indi	ia - Extraordinary - No.171, dated the 6th				
	blished in Gazette of India	a - Extraordinary - No.241, dated the 27th				
	ublished in Gazette of Indi	ia - Extraordinary - No.270, dated the 6th				
	ublished in Gazette of Ind	lia - Extraordinary - No.71, dated the 4th				
Shri/Smt./Kum*	and	/or his/her family ordinarily reside(s) State. This is also				
in theDistr	ict of the	State. This is also				
to certify that he/she does not belong to the persons/sections (Creamy Layer) mentioned in						
column 3 (of the Schedule to the Government of India, Department of Personnel & Training OM						

column 3 (of the Schedule to the Government of India, Department of Personnel & Training OM NO.36012/22/93 –Estt(SCT), dated 08.09.1993) and modified vide Government of India, Department of Personnel and training O.M No.36033/3/2004-Estt.(Res) dated 09.03.2004.

Place :_____

Dated : _____

Signature_____

District Magistrate/Dy. Commissioner

etc.

*Strike out whichever is not applicable (With seal of office)

NB: (a) The term 'ordinarily' used here will have the same meaning as in section 20 of the Representation

of People's Act., 1950.

- The Authorities competent to issue OBC caste certificates are indicated below :-

(i) District Magistrate / Additional Magistrate / Collector / Deputy Commissioner /Additional Deputy

Commissioner / Deputy Collector / 1st class Stipendiary Magistrate / Sub - Divisional Magistrate / Taluk Magistrate / Executive Magistrate / Extra Assistant Commissioner (not below the rank of 1st class Stipendiary Magistrate).

(ii) Chief Presidency Magistrate / Additional Chief Presidency Magistrate/ Presidency Magistrate.

(iii) Revenue Officer not below the rank of Tahasildar, and

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

Government of (Name & Address of the authority issuing the certificate)

INCOME & ASSEST CERTIFICATE TO BE PRODUCED BY ECONOMICALLY WEAKER SECTIONS

Certificate No.

Date:

VALID FOR THE YEAR_

Post O Pin Economically Weaker Sect lakh (Rupees Eight Lakh possess any of the following I. 5 acres of agricultura II. Residential flat of 10 III. Residential plot of 11	permanent resident of ffice District Code whose photograph ions, since the gross annual income* of only) for the financial year g assets***:	is attested below belongs to f his/her 'family'** is below Rs. 8 His/her family does not own or palities;				
2. Shri/Smt./Kumari belongs to the caste which is not recognized as a Scheduled Caste, Scheduled Tribe and Other Backward Classes (Central List)						
		•				
	Signature w	ith seal of Office				
	Ľ	Designation				
Recent Passport size attested photograph of the applicant						
	n de la constante de la constan La constante de la constante de					

*Note1: Income covered all sources i.e. salary, agriculture, business, profession, etc.

**Note 2:The term "Family" for this purpose include the person, who seeks benefit of reservation, his/her parents and siblings below the age of 18 years as also his/her spouse and children below the age of 18 years

***Note 3: The property held by a "Family" in different locations or different places/cities have been clubbed while applying the land or property holding test to determine EWS status.

G. Sicilaran