

MALABAR CANCER CENTRE

(An autonomous centre under Government of Kerala) Thalassery – 670 103, Ph: 0490 2355881, Fax: 0490 2355880 e - mail: mcctly@gmail.com. www.mcc.kerala.gov.in

APPLICATION FORM FOR SENIOR RESIDENCY January 2020

Application for the Post of Senior Resident in the Department of

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Instructions:

- 1. Read the notification carefully before filling in the application form
- 2. Incomplete applications will be summarily rejected.
- 3. Form should be filled in Capital Letters or printed in A4 Sheet
- 4. All irrelevant columns to be marked with NA
- 5. Attach Demand Draft of ₹ 1,000/- drawn in favour of *Director Malabar Cancer Centre* payable at *Thalassery* as application fee.

Application Fee Details:

D.D.No.....Date:

Name of Bank:......Amount:.....

Name:		
Age:	Date of Birth:	
	Date of Diffi.	(Affix Recent Passport Size Photograph Here)
Gender:		
Address for Communication:		
Phone Number:		
Email:		
Religion / Caste:		
Place of Birth:		
Name of Father / Mother:		

Academic Record

Exam Passed	Specializa tion	College/ Institute	Board / University	Year of Passing	Percentage Marks	Class / Grade

Professional Experience:

From Date	To Date	Duration (mo)	Institute	Designation	Job Profile

Any Details of Extracurricular Activities Participated In:

Number of Publications in Peer Reviewed Journals:

List of Publications (if any) to be attached as Annexure-I

Number of Posters / Presentations in State Level Conferences:

List of Posters/Presentations (if any) to be attached as Annexure-II

Number of Posters / Presentations in National Level Conferences:

List of Posters/Presentations (if any) to be attached as Annexure-II

Number of Posters / Presentations in International Conferences:

List of Posters/Presentations (if any) to be attached as Annexure-II

Thesis Title:

Number of Research Projects taken up in addition:

Details of Research Projects (if any) to be attached as Annexure-III

Name and Address of Two Referees in your field of specialization who can be contacted to verify details above.

Name	Phone Number	Email	Address

Have you been debarred from appearing for any exam conducted by any Central/State Government/ Quasi Government bodies/ dismissed from service or convicted by a Court of Law? (If Yes Give Details)

Attested copies (not below the rank of a Gazetted Officer) of the following to be provided in addition:

- 1. Age Proof
- 2. Mark sheets and Certificates of the academic and professional experience quoted above.

List of Enclosures / Annexures:

1. 2. 3. 4.

I hereby declare that I have carefully read and fully understood all the instructions and details pertaining to the post being applied by me and all statements made and information furnished in this application are true and complete to the best of my knowledge and belief. I also declare that I have not concealed any material information which may debar my candidature for the post applied for. In the event of suppression or distortion of any fact including category or educational qualification, etc. made in my application form, I understand that I will be denied any employment in the Institute and if already employed on any of the posts in the Institute, my services will be terminated forthwith.

Place:

Date:

Name & Signature

NB: All applicants are informed that canvassing in any form will lead to their applications being rejected. Defective applications in any respect will be summarily rejected. If the space provided in the application form is insufficient, separate sheets of paper may be attached and pinned to the main application form and reference to the same made in the relevant column.