## Ministry of Health & Family Welfare, Nirman Bhawan New Delhi – 110108

## Recruitment of staff for programme management unit (Trauma & Burns)

## APPLCATION FORM

To be filled by o					
Name of the pos					
Post applied for					
Name of the	e Applicant :				
2. Father's Na	me :				
3. Date of Birt					
4. Gender: M					
5. Educational Qualification:					
S. No	Academic /	Name of	Board /	Course	Division /
	Professional	Institution	University	Duration Yr.	Grade / % of
	Qualification			of Passing out	Marks
6. Experience:					
o. Experience.					
S. No.	Designation	Name of	From to	Field of	Salary drawn
		Institution /		Experience	
		Employer			
		+			
		-			

- 7. Training / Short Course attended :
- 8. Award and / or Outstanding Achievements:

9.	Contac	et Details:
	a.	Mailing Address:
	b.	Permanent Address:
	c.	Telephone Number (Res)( Mob)
	d.	Email –ID
10.	Docu	ments to be enclosed: Duly attested by Gazetted Officer(please Tick)
	1.	Degree / Diploma / Certificate ( )
		Experience Certificates ( )
		Age Proof ( )
		Any Other ()
11.	Unde	rtaking:
	an	ereby certify that all the information given above is true to the best of my knowledge. If y of the above information is found to be incorrect at a later stage, I shall be liable to be equalified / terminated from the service.
	Da	tte:
	Pla	ace :
		Signature of the Applican