



15. Professional Experience:

S. No.	Period	Post Held & Scale of Pay	Name of the Employer	Reason for leaving

16. List of Publications:

S. No.	Details of publication including all authors (attach separate sheet if required)	Journal Name	Impact Factor (Only SCI indexed)

17. Title of MD/Ph.D. Thesis, if applicable:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

18. Employment Exchange Registration details, (if available): No: \_\_\_\_\_ Exchange: \_\_\_\_\_

19. If selected what period would you require joining the post: \_\_\_\_\_

20. Have you ever been declared unfit by a medical board/court for appointment in any Govt. Service? (Yes/No), if Yes, give details \_\_\_\_\_

I hereby declare that the particulars furnished in this form by me are true to the best of my knowledge and belief and I agree to the terms and conditions of appointment given in advertisement.

Date: \_\_\_\_\_

Place: \_\_\_\_\_

Signature of the Candidate

ICMR-National Institute of Pathology  
Safdurjung Hospital Campus,  
Post Box. No. 4909  
New Delhi – 110029

FORMAT FOR APPLICATION

Photo

Post Applied:

1. Name of the post, applied for : \_\_\_\_\_
2. Name of the project : Establishment of MRHRUs at CHC-Bhunga, Punjab
3. Name in full (IN BLOCK LETTER) : \_\_\_\_\_
4. Mother's Name : \_\_\_\_\_
5. Father's Name : \_\_\_\_\_
6. Spouse's Name (if married) : \_\_\_\_\_
7. Address for Correspondence : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
8. Tell/ Mobile No. : \_\_\_\_\_
9. Email Id. : \_\_\_\_\_
10. Permanent Address : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
11. Date of Birth & Age as on : \_\_\_\_\_  
: \_\_\_\_\_ Days \_\_\_\_\_ Months \_\_\_\_\_ Years
12. Category : SC \_\_\_\_\_ ST \_\_\_\_\_ OBC \_\_\_\_\_ PH \_\_\_\_\_ Gen \_\_\_\_\_
13. Marital Status : Married/ Unmarried
14. Educational Qualifications : \_\_\_\_\_  
\_\_\_\_\_
15. Experience, if any : \_\_\_\_\_  
\_\_\_\_\_
16. Any other information : \_\_\_\_\_  
\_\_\_\_\_

I hereby declare that the particulars furnished in this form by me are true to the best of my knowledge and belief and I agree to the terms and conditions of appointment given in advertisement.

Date: \_\_\_\_\_

Place: \_\_\_\_\_

Signature of the Candidate