

**APPLICATION FORMAT:**

**North Eastern Indira Gandhi Regional Institute of Health & Medical Sciences, Shillong**

Advertisement No. & date .....

**APPLICATION FOR THE POST OF.....**

1. Full Name in Block letters :
2. Father's/Husband Name :
3. Date of Birth :
4. Age (As on 25.06.2018)
5. Sex :
6. Permanent Address in Full :
7. Present Address in Full :
8. (a) Contact No & :  
(b) Email Address :
9. Nationality (State whether by birth or by domicile)
10. Religion :
11. (a) Do you belong to PH/HH/VH? :  
(b) Percentage of disability :
12. Do you belong to Schedule Caste/Schedule Tribe/OBC? :
13. Details of Examination passed from Matriculation/School leaving certificate onwards:

|   |
|---|
| Affix recent<br>Passport Size<br>Photograph |
|---|

| Sl. NO | Name of School/College with Address | Examination Passed & Year of passing | Division/ Class obtained | % of marks obtained |
|--------|-------------------------------------|--------------------------------------|--------------------------|---------------------|
| 1.     |                                     |                                      |                          |                     |
| 2.     |                                     |                                      |                          |                     |
| 3.     |                                     |                                      |                          |                     |
| 4.     |                                     |                                      |                          |                     |

14. (a) Experience:

| Sl. No | Name of the Institution | Name of the Employer | Post(s) held |    | Nature of duty | Reason of leaving |
|--------|-------------------------|----------------------|--------------|----|----------------|-------------------|
|        |                         |                      | From         | To |                |                   |
| 1.     |                         |                      |              |    |                |                   |
| 2.     |                         |                      |              |    |                |                   |
| 3.     |                         |                      |              |    |                |                   |
| 4.     |                         |                      |              |    |                |                   |

b) Whether No Objection Certificate from the Employer is attached, if not, reason thereof:

**Declaration:**

**I hereby declare that the entries made in this form as above is true and correct to the best of my knowledge and belief. In the event of any information being found false/incorrect my candidature/services are liable to be terminated without any notice.**

Signature of applicant

**Station:** .....

**Date:** .....

**NB: The last date of submission of applications is one month of publication of this advertisement in the Employment News i.e., 25<sup>th</sup> June, 2018**