NORTH EASTERNIND IRAGANDHI REGIONAL INSTITUTE OF HEALTH AND MEDICAL SCIENCES, SHILLONG – 793018.

<u>APPLICATION FOR THE POST OF JUNIOR RESIDEN T(NON-ACADEMIC)</u>

Advertisement No:													
											recent	e attac passpo photo	ort
Personal details(in Block Letters):													
1.Full Name													
2.Father's/Husband													
Name													
3.Address for Correspondence													
4.Permanent Address													

5.E-mail ID										
6.Contact No										
							_	•		
7.Date of Birth (as on closing date of application)	D		D	M	M	Y	Y		Y	Y
	1	•	1		1	1	1	•	1	
8.Nationality										
9.Name of the state to which you belong										
10.Gender										
11.Religion										
12.Community										
13.Category	UR		•	OBC	S	SC	ST		F	EWS
14.If Physically Challenged(OPH Category) Percentage Disability										
15.DetailsofEducationalQ	ualification									
Examination Passed		University/Board/Institution/Council of Examination					Month, Year of Passing		o of Attempts	
Secondary(10 th)										
Senior Secondary(12 th)										
MBBS										

16.Date of completion of In	nternship				
17.NMC/State Medical Co	uncil Registration Nun	nber			
8.(a)Are you a sponsored o	candidates of the State	Govt. for pursui	ng studies in MBBS Co	urse.(Yes/No)	
(b)If yes, whether you has	_	rve the State Go	vt for a mandatory per	riod of 5 yrs	
(c)If yes, have you obtain	ned NOC from the state	e Govt to apply t	he post of JRD in the I	nstitute.	
Details of work experience	:				
19.Name of organization	Period of service	Designation	Nature of Duties performed	Reason for leaving Services	
	From To		performed	Services	
hereby declare that entri elief. In the event of an				•	
rminated without any not	ice. I			agree to abide	
ne terms and conditions of	contractual appointme	ent.			
Place :					
Date :			Signature o	f the Candidate	

CHECKLISTFORTHEPOSTOFJUNIORRESIDENT (Put a tick mark (✓) wherever applicable)

1.	Certificate of Date of Birth attached	:
2.	Certificate of EWS/SC/ST/OBC (Non Creamy Layer) from the Competent Authority attached	:
3.	Degree Certificate for MBBS attached	:
4.	Mark Sheets for MBBS attached	:
5.	Attempt Certificate attached	:
6.	Internship completion Certificate attached	:
7.	Medical Registration Certificate attached	:
8.	No Objection Certificate from the present Employer(if employed)	:
9.	Disability Certificate(if applicable)	:
10.	MCI/NMC Eligibility certificate for candidates(s) passing from foreign medical Institutions	:
11.	Screening Test certificate for Indian nationals with Foreign Medical Qualifications issued by the National Board of Examinations	:
12.	Application duly signed	:
	Name of the candidate :	
	Signature :	
	Date :	
	For Office Use Only	
	Remarks:	
	Checked hv:	