BHABHA ATOMIC RESEARCH CENTRE
MEDICAL DIVISION

Application No._____

APPLICATION FOR THE POST OF_____ (LOCUM BASIS)

PHOTO

1. Name in full beginning with Surname (in block letters) : (Shri./Smt./Kum)_____
_____
2. Nationality : _____
3. Marital Status : Married / Single / Widower / Widow
4. Age & Date of Birth (in Christian era) : _____
_____
5. Address in block letters : _____
(a) For Correspondence with
PIN code: : _____
: _____
Telephone/Mobile No. : _____
Email ID : _____
(b) Permanent Address : _____
_____
_____

6. Educational and Professional Qualification from SSC onwards:-

Sr. No	Examination passed	University/Board/ Institution	Year of passing	Subjects	Class & % of marks
1.	SSC				
2.	HSC				
3.	MBBS				
4.					
5.					

(P.T.O.)

7. Experience (Particulars of all pervious and present employment are to be furnished)

Name & Address Of Employer/Institute	Post Held with Pay	Whether Central /State /Govt./PSU	Period of Service		Permanent or Temporary	Reason for leaving
			From	To		

8. Area of Specialization: _____

9. Details of relatives employed in D.A.E. or its constituent units:-

Sr. No.	Name of Relative	Relationship	Unit in which employed	Post held

10. Any other information you may wish to add:

12. List of attested documents attached (Put [X] in the applicable box).

a) School Leaving Certificate (for Date of Birth) [ ]

b) Mark sheets of Educational & Professional Qualification [ ]

c) Passing Certificate [ ]

d) Experience certificate [ ]

e) MMC/MNC/MPC/DCI/IPA Registration Certificate [ ]

Date: _____

Signature: _____