

BHABHA ATOMIC RESEARCH CENTRE

MEDICAL DIVISION

Application No. _____

APPLICATION FOR THE POST OF _____

PHOTO

1. **Name in full beginning with Surname (in block letters)** : Shri/Smt./Kum) _____

2. **Nationality** : _____
3. **Marital Status** : _____
4. **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.					
4.					
5.					

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

Name & Address of employer/Institution	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 relative employed in D.A.E or its constituent:-

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

10. Any other information you may wish to add: _____

11. 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/OTPT Registration Certificate | [|] |

Date: _____

Signature: _____