

**THE GUJARAT CANCER & RESEARCH INSTITUTE**  
NEW CIVIL HOSPITAL CAMPUS, ASARWA, AHMEDABAD-380 016

Phone No: 079-2268 8012

Fax No. 079-2268 5490

**APPLICATION FORM**

Affix Photograph  
here

**Post Applied for:**

**Full Name of the Candidate as per Adhar Card:** \_\_\_\_\_

**Postal Address as per Adhar Card :** \_\_\_\_\_

City: \_\_\_\_\_ Pincode: \_\_\_\_\_ State: \_\_\_\_\_

**E-mail Address** : \_\_\_\_\_

**Mobile No** : \_\_\_\_\_ **Residence :** \_\_\_\_\_

**Date of Birth** : \_\_\_\_\_ **Age :** \_\_\_\_\_ **years (As on 20-08-2021)**

**Marital Status :** Single / Married **Nationality :** \_\_\_\_\_

**Gender :** Male  Female  \*Handicap

**Caste :** General  SC  ST  OBC  EWS

**Non-Creamy Layer Certificate No.** :  **Certificates Date:**

**Academic Details (from SSC or Equivalent onwards)**

Examination SSC/HSC/Diploma/Deg ree/ Computer/ Others	Faculty	Board / University	% of marks/Class/ Grade / Rank	Main Subjects	Year of Passing	Attempt
S.S.C.						
H.S.C.						
Diploma						
Degree						
Post Graduate Degree						
Super Speciality						
Any Other						

**Computer Literacy (Description of Computer Knowledge):**

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**Council Registration Number with State: (If Applicable)**

**BAMS / BHMS / MBBS / MD / MS / D.M / M.Ch / Dental / Nursing / Pharmacy & Other (Name:\_\_\_\_\_)**

**Registration No. Under Graduate: \_\_\_\_\_ Post Graduate: \_\_\_\_\_ State. \_\_\_\_\_**

**Work Experience (start with your recent employment):**

Name of the Organization / Institute & Place	Government Sector/ Private	Designation / Nature of work	Period			Monthly Salary Rs.	Reason for Change
			From	To	Total Years		

**Language Proficiency (Tick Mark the Appropriate Column):**

Sr. No.	Language	Satisfactory	Good	Excellent
1	English			
2	Hindi			
3	Gujarati			
4				
5				

**Any Other Details/ Remark/ Course/ Speciality/ Achievement &  
Present Job Description (Role & Responsibilities):**

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**Details of Research Paper Publication / Acceptance (Start with Recent) for Teaching Post:**

State/ National / International Journal	No. of Paper	Published year	Name of Journal	Indexed (Yes/No)	Name of Article ( attach list separately )	Verify by concern HOD use
1	2	3	4	5	6	7

**Present & Expected Salary Package**

	Present(Rs.)		Expected (Rs.)	
	Gross	Net	Gross	Net
Salary & Allowances (p.m.)				

**Provide Names, Designations and Phone Nos. of Two References who you know and / or your work and whom we can contact directly for reference.**

- \_\_\_\_\_
- \_\_\_\_\_

**Undertaking**

I declare that information stated above are true to the best of my knowledge. If above information is found to be false, I am bound to obey the decision of selection committee.

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

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

Signature: \_\_\_\_\_

1. Application Form duly signed
2. Detailed Bio-data.
3. Adhar Card, Pan Card.
4. School Leaving Certificate / Birth Certificate.
5. Passing Certificate & Marksheet
6. Caste Certificate.
7. Income Certificate for EWS (Economically Weaker Section) Quota.
8. Photocopies duly attested of S.S.C, H.S.C, U.G., P.G & Super Speciality Final year Marksheets, attempt Certificate with Gujarat State Medical Council Registration / or other State's Medical Council Registration.
9. Photocopies of Degree Certificate & Experience Certificates.
10. Basic Knowledge of Computer Application as prescribed in the Gujarat Civil Services Classification & Recruitment (General) Rules, 1967.
11. Original NOC from Present Employer.