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

Phone No: 079-2268 801	12 Fax No. 079-22	Fax No. 079-2268 5490		
	APPLICATION FORM	Affix Photograph here		
Post Applied for:				
	ndidate as per Adhar Card: per Adhar Card :			
	City:Pincode:State:			
E-mail Address	:			
Mobile No	: Residence :			
Date of Birth	:Age : years (As on <u>14-10-2021</u> )	<u>)</u>		
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):**

#### 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	То	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):

## 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**

	Preser	nt(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.

1. \_\_\_\_\_

2. \_\_\_\_\_

## <u>Undertaking</u>

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:

# Application Form should be filled and brought along with documents mention 1 to 12 below otherwise Application Form will be outrightly rejected.

- 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.