APPLICATION FOR ENGAGEMENT OF BANK'S MEDICAL CONSULTANT (ON CONTRACT BASIS WITH FIXED HOURLY REMUNERATION) RESERVE BANK OF INDIA, BELAPUR

Affix recent passport size photograph with applicant's signature

1.	Name in Full (In Block Letters)	Shri / Smt./ Kum.	
2.	Father's / Husband's Name	Shri	
3.	(a) Address	Residence:	Dispensary:
	(b) Phone No.	Landline:	Mobile:
	(c) E-mail ID		
	(d) Approximate Distance to the Bank's dispensary located at Reserve Bank of India, Post Box No.15, Sector 10, Plot No.3, H.H. Nirmaladevi Marg, CBD Belapur, Navi Mumbai-400 614.	Approximate Distance from the applicant's Residence (in kms)	Approximate distance from the Dispensary/ Hospital where the applicant is currently working (in kms)
4.	Date of Birth in DD-MM-YYYY format (as recorded in School Leaving certificate) and Age (as January 1, 2021)		
5.	Place of Birth and Domicile		
6.	Nationality		
7.	Category*	OBC	GEN

^{*}The candidates belonging to other categories are eligible to apply under General Category

8.	Educational Qualifications:								
Sr No	Degree / Diploma	University / Board				Year of Passing	Percentage / Class		
9.	Particulars of any other course in medicine completed by the applicant								
Sr No	Course Name	te			Year of completion				
10.	Details of experience (Only experience gained after graduation should be stated)								
Sr	Experience		From	То	Perio	eriod			
No					Year	´S	Months		
(a)	In Hospital (As a physician)								
(b)	As General Practitioner								
11.	Any other factors which the applicant would like to brin account for considering his application								

I hereby declare that the information and particulars given by me in this form are true and correct. I also note that if any of the above information is incorrect or false or if any material information or particular has been suppressed or omitted therefrom, my engagement is liable to be terminated without notice or compensation in lieu of notice.

Place: Date:

Instructions

- 1. All the details in the application form must be filled by the applicant.
- 2. Applications which do not contain the full particulars/incomplete applications are liable to be rejected.
- 3. Attested copies of certificates regarding educational qualifications, Identification details, age, work-experience, Medical Council registration, caste etc. should be enclosed with the application form.
- 4. If the candidate is working as a Medical Officer for any institution, the details thereof and working hours therein should also be indicated.