



Application Form

Application for Engagement as Part-Time Medical Consultant (MC) on Contract Basis with Fixed Hourly Remuneration

Reserve Bank of India, Mumbai Office

Affix recent Self-Attested Passport size photograph

1	Name in full		
	Shri/Smt./Kum.		
	(to be given in		
	block letters,		
	Surname to be		
	stated first)		
2	Father /Husband's		
	Name:		
3	(a) Address	Residence:	Dispensary:
	(b) Phone No.	Landline:	Mobile:
	(c) email ID		

4. Approximate distance from the Bank's Dispensary located at:

		Distance (in Km) from		
Sr. No.	Address of the Dispensary	Applicant's Residence	Dispensary /Hospital where the applicant is currently working	
i	Reserve Bank of India, Mumbai Regional			
	Office, Amar Building, Fort, Mumbai -			
	400001			



ii	M M Marg, RBI Staff Colony, Mumbai	
	Central, Mumbai, Maharashtra 400008	
iii	Mumbai Central West, opposite Railway	
	Station, Mumbai, Maharashtra 400008	
iv	Nalanda Reserve Bank Officers' Quarters,	
	VN Purav Marg, Basant Garden,	
	Chembur, Mumbai, Maharashtra 400071	
V	RBI Officers' Quarters Dhanastra, N P	
	Marg, Colaba, Mumbai-400005	
vi	Krishna Vatika Marg, Snehadham,	
	Gokuldham Colony, Goregaon, Mumbai,	
	Maharashtra 400063	
vii	P Balu Marg, RBI Colony, Prabhadevi,	
	Mumbai, Maharashtra 400025	
viii	North Ave, Vithaldas Nagar, Santacruz	
	West, Mumbai, Maharashtra 400054	
ix	RBI Officers Quarters, Hindmata, Parel,	
	Mumbai, Maharashtra 400014	
Х	Chamundeshwari Nagar, 4,	
	Chamundeshwari Nagar, Ganesh Murti	
	Nagar, Cuffe Parade, Mumbai,	
	Maharashtra 400005	
xi	Plot No.3, Sector 10, H.H. Nirmaladevi	
	Marg, CBD Belapur, Navi Mumbai 400 614	
xii	RBI Officers Quarters, Vasant Vihar	
	Napean Sea Road, Mumbai-400006	
xiii	Tapovan, RBI Officers Quarters,	
	Pathanwadi, Malad(E), Mumbai-400097	
xiv	Kailash, RBI Officers Quarters, Near	
	Saibaba Mandir, Malad (E), Mumbai-	
	400097	



XV	RBI Officers Quarters, Sun Plazzo,
	Matulya Compound, S. B. Marg Lower
	Parel, Mumbai - 400013
xvi	Tardeo Officer's Quarters, Opp. A.C.
	Market, Tardeo Road, Mumbai – 400034

5	Date of Birth in DD-MM-YYYY format and age as on December 01, 2023	Date of birth: Age:					
6	Place of Birth and Domicile						
7	Nationality						
8	Category-Tick (√) the appropriate box	SC	ST	OBC	EWS	GEN	
9		Education	al Qualifi	cations			
Sr. No.	Degree/ Diploma	University/ Board	Year of	Year of Passing		Percentage	
10	-	Particulars of any other course in medicine co					
	Course Name	Institute		Yea	r of Comp	letion	
44	D. ()	(0.1.5		1 - 61 1	-Carala		
11	stated)	of experience (Only Experience gained after graduation should be				uid be	
Sr.	Experience	From	То	<u>•</u>			
No.				Years	Mo	onths	
(a)	In Hospital (As a Physician)						



(b)	As General Practitioner		
12	Any other factors which the applicant would like to bring into account for considering his/her application	,	,

I hereby declare that the information and particulars given by me in this form are true and correct. I understand that if at any stage, it is found that any information given in this application is false/ incorrect or that I do not satisfy the eligibility criteria according to the Bank, my candidature/ appointment is liable to be cancelled/ terminated without notice or compensation in lieu of notice. I have read and understand the stipulations given in the advertisement and hereby undertake to abide by them.

(Signature of the applicant)		
Place :		
Date :		

Instructions

1. All the details in the Application Form are to be filled up completely by the applicant, as incomplete Forms are liable to be rejected.



- 2. Self-attested copies of certificates regarding age, educational qualifications, experience, caste, copy of registration certificate issued by Medical Council of India etc. should be attached/enclosed with the application.
- 3. In support of the experience gained by the applicant the submitted Certificate must contain the details of duty hours and the nature of duty. (If the candidate is working as a Medical Officer for any institution the details thereof and working hours therein should be indicated.)