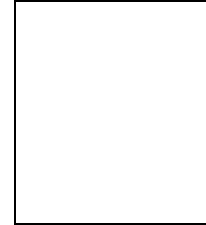


Annex – (i)

FORM
RESERVE BANK OF INDIA, KOLKATA

**Application for Engagement of Medical Consultant
on contract basis with fixed hourly remuneration**



1. Name in full: Shri/Kum./Smt. _____

(to be given in block letter, Surname to be stated first)

2. (a) Address : Residence Dispensary

(b) Phone No. :

Mobile No:

(c) Approximate distance from the Bank's:

Dispensary at Dum Dum Staff Quarters
at 1/B, B. K. Pal Lane, Dum Dum,
Kolkata – 700 030

3. Date of Birth and Age:
as on February 01, 2013

4. Place of Birth and Domicile:

5. Nationality:

6. Educational Qualifications:

(Indicate degree/diploma obtained,
in the order of highest to least)

Degree/Diploma	University/Board	Year of passing	Class/Rank

7. Particulars of any other professional:
course completed in Medical field

8. Details of experience - (Experience after graduation only should be stated)

Experience	From	To	Period	
			Year/s	Month/s
In Hospital (as a Physician)				
As General Practitioner				

9. Any other factor which applicant would like to bring into account in support of his/her 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 statements are incorrect or false or if any material information or particulars has been suppressed or omitted therefrom, my services are liable to be terminated without notice or compensation in lieu of notice.

Date:

(Signature of the applicant)

INSTRUCTIONS

- a) All the details in the Application Form are to be filled up completely by the applicant, as incomplete Form are liable to be rejected.
- b) Attested copies of relevant certificates regarding age, educational qualifications, experience etc. should be attached with the Form.
- c) In support of the experience gained by the applicant the submitted Certificate must contain the details of duty hours and the nature of duty.
