

## APPLICATION FORM

**Application for Engagement of Bank's Medical Consultant  
On Contract Basis with fixed hourly remuneration at Reserve Bank of India, Nagpur**

Fix recent Self-  
attested Passport  
size photograph

1.	Name in full Shri / Smt. / Kum.		
2.	Father/Husband's Name		
3.	(a) Address	Residence:	Dispensary:
	(b) Phone No.	Landline:	Mobile:
	(c) E-mail ID		
	(d) Approximate distance from the Bank's dispensary located at:		
	Location of Bank's Dispensary	Distance from Residence (in Kms)	Distance from Dispensary/Hospital (in Kms)
	(i) Reserve Bank of India, Main Office Building, Dr. Raghavendra Rao Road, Civil Lines, Nagpur		
	(ii) Reserve Bank of India, Additional Office Building, West High Court Road, Civil Lines, Nagpur		
(iii) Atre Layout Staff Quarters, Atre Layout, Nagpur			
(iv) Telankhedi Road Staff Quarters, Civil Lines, Nagpur			

	(v) Byramji Town Officers Quarters, Nagpur					
	(vi) Amravati Road Staff Quarters, Nagpur					
4.	Date of Birth and age as on <b>01/07/2024</b> (DD/MM/YYYY)					
5.	Place of Birth and Domicile					
6.	Nationality					
7.	Category (√) Tick the appropriate box	SC	ST	OBC	EWS	UR (GEN)
8.	Educational Qualifications					
Sr. No.	Degree / Diploma	University / Board	Year of Passing	Percentage / Class / Rank		
9.	Particulars of any other course in medicine completed by the applicant					
10.	Details of experience (Only Experience gained after graduation should be stated)					
Sr. No.	Experience	From	To	Period		
				Years	Months	
(a)	In Hospital (As a Physician)					
(b)	As General Practitioner					
11.	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 also note that if any of the above information is incorrect or false or if any material information or particulars have been suppressed or omitted therefrom, my engagement is liable to be terminated without notice of compensation in lieu thereof.

Place:  
applicant)

(Signature of the

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. Attested copies of relevant certificates regarding age, educational qualifications, caste & validity, experience, ID, Address etc. should be attached with the Application Form.
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.)