<u> आवेदन फार्म</u>

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

Fix recent Selfattested 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		
	cated 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 01/07/2024 (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			ar of ssing	Percentage / Class / Rank			
9.	Particulars of any oth course in medicine complete by the applicant								
10.	Details of experience (Only Experience gained after graduation should be stated)								
Sr.	Experience	From	From To			Period			
No.	In Heapital (As a Dhusisian)				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	ng							

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.

स्थान:

(Signature of the applicant)

दिनांक

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.)