

Contractual Appointment of Medical officers and consultants under NRHM, UT Ladakh.

1. Advertisement Notice No: _____ Dated: _____

2. Name of the post applied for: _____

3. Name of Health Institution: _____

4. Category _____ S.No. of Health Institution as per annexure _____

5. Name of Candidate: _____

6. Parentage: _____

7. Permanent Address: _____

8. D.O.B _____

9. Registration:

(a) Number: _____

(b) Date: _____

(c) Place: _____

Self attested
passport size
photo.

10. Academic Details:

"A" Medical Officer:

Degree	Name of Institution	Year of passing	Percentage Marks in final year.
MBBS			

"B" Consultant:

Degree	Name of Institution	Year of passing	Percentage Marks in final year.
MBBS			
Post Graduation			

11. Experience from recognized Institution:

"A" Medical Officer:

Name of Institution	Number of years

"B" Consultant:

Name of Institution	Number of years in relevant subject

12. List of supporting documents.

Medical Officer:

1. Address proof: Passport/Adahar Card/Pancard
2. MBBS Degree certificate from a recognized institution.
3. Registration certificate from Medical Council of India.
4. Experience certificate from recognized institution.

P.T.O

Consultant:

1. Address Proof: Passport/Adahar Card/Pancard
2. MBBS Degree certificate from a recognized institution.
3. Post Graduate Degree from recognized institution.
4. Registration certificate as consultant from Medical Council of India.
5. Experience certificate in relevant subject from recognized institution.

Signature of the applicant.