

**INDIRA GANDHI INSTITUTE OF MEDICAL SCIENCES: SHEIKHPURA: PATNA-14****APPLICATION FORM FOR THE POST OF JUNIOR RESIDENT**

1.	Advertisement No.	: 15/Jr. Resident & Sr. Resident /IGIMS/Estt./2015			Affix your recent Photograph
2.	Name of the Applicant	:			
	Permanent Registration Number (MCI/Bihar Medical Council)	Reg. No. : Date of Registration:			
3.	Father's Name	:			
4.	Date of Birth (With Proof of Age)	Date:	Month:	Year:	
	 Yrs. Months Days	
5.	Whether belongs to <u>SC/ST/BC/MBC/BC (Female) or Handicapped</u> : (Cast Certificate issued by the Circle Office, for SC/ST candidates along-with Domicile Certificate and Caste Certificate issued by Circle Officer for BC and MBC candidates with exemption from Creamy Layer, along-with Domicile Certificate should be attached).				
6.	Permanent Address	:			
7.	Address for Correspondence	:			
8.	Contact Number (Mobile/Land Line)	:			
9.	Citizenship:				
10.	Educational Qualification: (Attach all Certificates: Photocopy)			Screening Certificate in case of Foreign Degree	
	Examination Passed: MBBS	College/Institution.	Year of Passing	Marks Obtained	Percentage of Aggregate Marks in all Professional Examination.
					Attempt
11.	Name of the College/Institution :				
12.	Date of Completion of Internship:				
13.	Department in order of preference:				
	1 st	2 nd	3 rd		
14.	Whether done any Junior Residency (Non-Academic) at IGIMS or out-side , if so mention the department/period subject				
	Subject	From	To	Organization/Institution	
15.	Details of Bank Draft with Date of issue, Place and Amount				
	Name of the issuing Bank	Place & Date	D.D. No.	Amount	

PLEASE NOTE:

- Incomplete application/s will be rejected straight away.
- If it found that the applicant has suppressed any information or given wrong information his/her Junior Residency will be terminated forthwith without assigning any reason.

DECLARATION

I do hereby declare that the information/s furnished above is true and correct to the best of my knowledge and I shall abide by the Rules and Regulation of IGIMS.

Place:

Date:

Signature of the Applicant

N.B.: Please affix the following with the application form:

- One recent passport size photograph (Space Provided)
- Self attested copies of all certificates/testimonials.