

M.B.B.S.

(ii)

Postgraduate Medical Education (i) MD/MS/MDS/DM/M.Ch Please indicate duration of DM/M.Ch. Course) (i)

Any other examination(s)

INDIRA GANDHI INSTITUTE OF MEDICAL SCIENCES; SHEIKHPURA: PATNA-800014

			FACULTY POSTS			Affix your recen pass-port size	
Ро	st applied for	<u>Adv. No. 1</u>	1/Fac	ulty-Non Fac	ulty/IGIMS/Estt./2015.	photograph here	
De	partment:						
1.	Name in block letter						
2	(a) Permanent Address		ļ				
L	(b) <u>Postal Address</u>						
	(c) <u>Tele./Mob. No</u> . (d) E-mail Id.						
3	Date of Birth with documental cut-off date	y evidence and age as on	Day	Month	Date of Birth Year: Age:		
4		or by domicile? om Pakistan with the intention ia OR a subject of Nepal OR					
5	Are you a Scheduled Caste/Sch Candidate/ Ex-Serviceman? (At	tach documentary evidence)					
6	Name of the state to which yo	ou belong?					
7	Father's Name Address Occupation If dead, state his last address and Is or was your father alive? (a) A citizen of India by birth or by (b) A person having migrated Intention of permanently s of Portuguese possession	from Pakistan with the etting in India or a subject in India?					
8-	Particulars regarding your Unive Name of University	ersity or Higher Education. College, if any		Date of er	ntry Date of le		
	Name or onnotisky						
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	Name of the Examination	Months & Year of Passing the examination	Э	No. of attempted	Distinction or prize if any in any o	more subjects.	
	ence Faculty (M.Sc.) D.						

10. Research experience if any together with details of published works, reprints of such works should also be submitted, if available.	
Indexed/Non-indexed	
(Reference should be given, if research papers were abstracted in any	
Indexed/well known medical or science journals or reference made to works in monographs or test on the subject)	
 Details of teaching and professional experience. Details should be given in separate sheet if the space is insufficient. Attach Certificate. 	
Are you willing to accept the minimum initial pay offered? if not, state what is the lowest initial pay that you would accept in the prescribed scale ?	
If selected what notice would you require before joining?	
List of enclosures.	
Number, date and the amount of the Demand Draft enclosed.	

CANDIDATE ALREADY EMPLOYED SHOULD GET THE FOLLOWING ENDORSEMENT SIGNED BY HIS/HER PRESENT

EMPLOYER ≻

- Dated.....
- \triangleright Signature

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Date of Departure	Period of Stay abroad	Purpose of stay abroad

12. State foreign language or languages you know (a) To read and write?

- (b) To speak also?

13. Where have you been employed? Give particulars below:-

Name of the employer	Date of joining	Date of leaving	Name of the post held(also state whether temporarily or substantively)	Pay Scale and present rate of pay and allowances
L		L	1	
Are you a Govt. servant ar If so, will you give up you s (Answer 'Yes' or 'No')	nd entitled to pension? status before joining th	ne Institute		

INDIRA GANDHI INSTITUTE OF MEDICAL SCIENCES: PATNA-14

(Please fill this pro-forma neatly typed)

Post applied for ---------- Date of birth------Name -Whether belong to SC/ST/BC/EBC------ Minimum Basic Pay acceptable ------

Present Employer (Institution) ------ Minimum joining time required ------

Whether "No Objection Certificate" furnished: Yes/No/Not applicable ------- Total teaching experience after M.D./M.S./M.D.S./D.M./M.Ch.------ Years------ Month ------

Present Position ------ Present Basic Pay with Pay Scale Rs. -----

Academic Qualification			Publication and Research Work (Give number only)			
Degree(Examinations) of (M.D./M.S./M.D.S./ D.M./M.Ch. Course)	Months & Year	No. of attempts		Published	Under Publication	1 st Author / Communicating Author
			 Research Papers (a) Indexed Journals (b) Non-Indexed Journals 			······
			 2. Books (a) Text books (b) Edited Books (c) Educational Books 3. Chapter in Books 	·····	······	······
DEGREE (Honorary)			 4. Abstracts (a) Indexed Journals (b) Non-Indexed Journals 			

Best Papers:

(iv)

(i) For Assistant Professor

(ii) For Associate Professor

For Additional Professor (iii)

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For Professor

List should be enclosed separately) Research Guidance

Number of scholars who have been awarded D.M. /M.Ch. / M.D. / M.S. /M.D.S./Ph.D. degrees under your Supervision both as quide & Co-quide

Supervision both as g Awarded	Under Submission				
Ph. D					
M.D./M.S					
M.D.S					
D.M./M.Ch					

TEACHING/RESEARCH EXPERIENCE						
<u>Institution</u>	Post Held	From	<u>To</u>	Total Experience		

1)	Research Projects as Chief Investigator							

Source of funding Total amount Year

- Awards, fellowships and membership of professional bodies (Enclose Evidence) 2)
- 3) Membership of Editorial Board of Indexed International Journals/Review Committees of National bodies and Institutions (Enclose Evidence).
- Services: (Contributions made towards the development of new 4) unit/specialty/laboratory/facility/programs/therapeutic or diagnostic procedures developed or patients taken (enclose evidence)
- Contributions in community & national programs (Enclose Evidence)
- 5) 6) Describe your most notable contribution in Teaching and Research in 200 words.

IMPORTANT

I, hereby declare that the information and documents given by me in the per-forma is correct to the best of my knowledge.

Signature

Name