

## APPLICATION FOR THE POST OF ANAESTHETIST ON CONTRACT BASIS

NOTIFICATION 3/2021

Regd. No. \_\_\_\_\_ (To be filled by office)

Affix pass  
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Photo

1	Name of the Applicant (In Block Letters)	
2	Father's Name	
3	Gender	
4	Date of Birth	
5	Age as on (1 <sup>st</sup> July 2020)	
6	Educational Qualifications	
7	Social Status (Caste)	
8	Creamy layer of BC (if applicable)	
9	E-mail ID	
10	Residential Telephone Number	
11	Personal Mobile Number	
12	Whether belongs to Physically Handicapped category	
13	Permanent Registration Numbers of A.P. Medical Council for MBBS & PG Degree / PG Diploma	
14	Month & Year of passing of MBBS	
15	Month & Year of passing of PG/Diploma	
16	Permanent Address	
17	Present Residential Address for correspondence	
18	Native District	

## 19.Details of School Study:

Sl. No.	Class	Year of Passing	School & Place	District
1	IV			
2	V			
3	VI			
4	VII			
5	VIII			
6	IX			
7	X			

20. If the candidate studied privately, details of places of residence during the period immediately preceding 10<sup>th</sup> Class. Local Candidature certificate from Revenue authorities to be enclosed.

Sl. No.	Class	Year of residence		Place	District
		From	To		
1	IV				
2	V				
3	VI				
4	VII				
5	VIII				
6	IX				
7	X				

21. Year wise marks obtained in MBBS (MBBS & PG Degree/Diploma Xerox attested copies to be enclosed).

MBBS	Year of Passing	Name of the College & University	Maximum Marks	Marks obtained	% Secured
I. MBBS					
II. MBBS					
III. MBBS					
IV. MBBS					
Final Year MBBS	Part-I				
	Part-II				
Total					

### **DECLARATION**

22) I, Dr. \_\_\_\_\_, S/o.

\_\_\_\_\_ certify that the particulars given above are correct to the best of my knowledge and belief. I also agree that in the event of any of the particulars furnished in my application being found to be incorrect or false at a later date, my appointment shall be cancelled automatically.

23) Dr. \_\_\_\_\_, S/o.

\_\_\_\_\_ will abide by the rules under which I may be appointed on contract basis for the period decided by the Selection Committee, if selected. I will join in the place where ever (Hyderabad) I am posted, failing which I shall forfeit my rights of appointment in this recruitment.

SIGNATURE OF THE APPLICANT WITH DATE

Multi zone Cadre

**CERTIFICATES TO BE ENCLOSED (ATTESTED)  
PEDIATRICIAN IN SNCU**

**All the certificates to be enclosed in the following series only indicating the page number.**

1. Bonafied certificates (IV to X)
2. SSC Marks Memo
3. Intermediate marks memo and bonafied
4. MBBS Marks memos year wise and consolidated with total marks
5. MBBS registration by medical counsel
6. MBBS degree certificate and bonafied
7. Diploma/PG Degree marks, bonafied and registration
8. Caste certificate