All India Institute of Medical Science (AIIMS) Rishikesh, Uttarakhand-249203

Application form for 'Project Technical Support- III'

Latest

1.	Name in	full (IN BLO	CK LETTERS)	(Name) (Surname)			Photograph of the Candidate				
2.	Father's /Husband Name :			. ,			(Surname)				
3.				:							
4.	. Email ID :			:							
5.	Address	for Correspo	:								
6.	Permanent Address			:							
7. 8. 9. 10.	Date of Birth : Age : Whether SC/ST/OBC/General : Marital Status : Married / Unmarried Educational Qualifications :										
-	Sr.No.	Sr.No. Exam. Passed		Grade		ear of assing	Board / University	Special Subjects			
•											
11.	. Work experience (if any):										
	Sr.No.	.No. Period To		Post held & Scale of Pay		Name of the Employer		Reasons for leaving			
-											
	2. If selected, what period would you require to join the post:										
		f Reference ion (if any):	(Two): Namo	e, designation	, addr	ess, ema	il ID, and contact no:				
	knowled at any s	lge and belice tage, my cale ompensation	ef. I underst ndidature/ a	furnished ab and that in th appointment s	oove i	nt of my	information being fo	et to the best of my bund false or incorrect mation without notice			