

**APPLICATION FORM**

**SENIOR RESIDENT –T.S**

**(Please download two copies and submit at the respective college)**

AFFIX PHOTO

Name of College applying for: \_\_\_\_\_

Degree: MD/MS/DNB/MCh/DM : Speciality: \_\_\_\_\_

Name of College and Place (MD/MS/MCh/DM): \_\_\_\_\_

If DNB: Name of Institute: \_\_\_\_\_

If DNB done from other than MCI recognized College – Name of Medical College where Junior Residency completed after DNB: \_\_\_\_\_

Period of Junior Residency (with necessary enclosures): Total Duration: \_\_\_\_\_

From: \_\_\_\_\_ To \_\_\_\_\_

Local: Telangana/Andhra: \_\_\_\_\_ Non/Local: \_\_\_\_\_

1.Name of the Candidate : \_\_\_\_\_

(Full Name in block letter including surname)

2.Email-id : \_\_\_\_\_

3.Phone / Mobile No. : \_\_\_\_\_

4.Address for communication : \_\_\_\_\_

\_\_\_\_\_ Pincode : \_\_\_\_\_

5. Sex : Male/Female

6. Community : OC/BC-A/B/C/D/ SC/ST

7.Date of Birth (DD/MM/YY) :

8. Age in years( as on 31-07-2018) : \_\_\_\_\_

9.Permanent Address \_\_\_\_\_

\_\_\_\_\_ Pincode: \_\_\_\_\_

Contact No : \_\_\_\_\_

10. Theory Marks obtained in the Degree /Super Specialty exam : \_\_\_\_\_

11. Details of Bank Account : \_\_\_\_\_

1) Name of the Bank and Branch : \_\_\_\_\_

2) Account No : \_\_\_\_\_

3) IFSC code : \_\_\_\_\_

12. PAN Number : \_\_\_\_\_

13. Aadhar Number: \_\_\_\_\_

**Signature of Candidate**

**(For office use only)**

Allotted for posting from \_\_\_\_\_ to \_\_\_\_\_ at

\_\_\_\_\_ College / Hospital.

Candidate should join on or before \_\_\_\_\_

**PRINCIPAL**