

APPLICATION FORMAT

Application for the post of _____ on contract basis in the
Government Medical College & Hospital, Sector -32, Chandigarh

Self Attested
Recent Passport
size photograph

1. Name of the Applicant _____
2. Father's Name _____
3. Date of Birth _____
4. Address for Correspondence _____

- Pin Code- _____
5. Mobile No. _____
6. Email id _____
7. Educational Qualification _____
8. Retired as (name of post) _____
9. PPO No. _____
10. Retirement orders (Number/date) _____
11. Last Basic Pay drawn before retirement _____
12. Service Details :-

Sr. No.	Name of Department where service rendered	Post Held	Period of service		Total period of service
			From	To	
01					
02					
03					
04					

Declaration:- I _____ S/o _____, do hereby certify that the
above information is true and correct to the best of my knowledge and belief. Further, there is
no criminal / vigilance enquiry / proceedings are pending or likely to be contemplated against
me as on date.

Place:-
Date:-

(Signature of Applicant)