पताः राजर्षि दशस्थ स्वशासी राज्य चिकित्सा महाविद्यालय, सोसायटी, ग्राम— गंजा, परगना— हवेली, तहसील— सदर, जनपद— अयोध्या, उ०प्र० 224133

Application Form for SR/Non PG JR/Tutor

1:- Name:		D1 4 .
2:- Date of Birth :-	Age/sex:	Photo Self
3:- Category GEN/OBC/SC/ST (Enclose	e Category certificate if required)	Attested
4:- Father's Name: -		
5:- M.B.B.S/B.D.S College Name & Du	aration: -	
(Enclose Attested Photocopy)		
6:- PG College Name & Institution		
(Enclose Attested Photocopy)		
7:- Experience:-		
(Enclose Attested Photocopy)		
8:- Email ID:		
9:- Address: -		
(Enclose Aadhar card/Pan Card Atte	ested Photocopy)	
10:- Contact. No :- (1):-	(2):-	

Signature of Applicant

// Announcement //

- 1- I certify that the above information given by me is complete and true. In the event of information being false, my application form / appointment letter can be cancelled.
- 2- I certify that I have not been found guilty by any court of any offense of moral decimation nor is there any such case against me in any jurisdiction.

Place
Date

Full Name and Signature of the Applicant