

APPLICATION FOR THE POST OF _____
at SDS TRC & RGICD, Bengaluru

Notification No. SDS/ Rect(371J)/03 dated: 18.03.2020

Photograph

Paste the recent
passport size
photograph.
(do not pin or staple)

1.	Name of the Applicant (in CAPITAL letters)	
2.	Age & Date of Birth as recorded in the SSLC certificate	Age <input type="text"/> <input type="text"/> DD <input type="text"/> <input type="text"/> MM <input type="text"/> <input type="text"/> YYYY <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
3.	Name of Father / Husband	
4.	Postal address for correspondence.	
5.	Permanent address	
6.	E-mail address	
7.	Mobile No.	
8.	Telephone No.	
9.	Physically Disabled	YES <input type="checkbox"/> No <input type="checkbox"/>
10.	Ex-Servicemen	YES <input type="checkbox"/> No <input type="checkbox"/>
11.	Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>
12.	Nationality	Indian <input type="checkbox"/> Others <input type="checkbox"/>
13.	Community (Tick \checkmark in the appropriate box)	SC <input type="checkbox"/> ST <input type="checkbox"/> OBC <input type="checkbox"/> Others <input type="checkbox"/>
14.	Particulars of registration with KNC / Other council / Board to be furnished	
	Qualification	
15.	Details of the Qualification:	

Sl. No	Qualification	Total Marks obtained / Grade in all the years	Percentage	Name of the College & University. Date, Month & Year of passing
1	SSLC			
2	PUC			
3	Nursing / Para-Medical			
4	Any Degree			
16 Experience / Particulars of Previous and Present employment				
Designation		Period (DD/MM/YYYY)		Name of the Hospital / Institute
		From	To	Total no. of years
17	Date of working in SDS TRC & RGICD			
18	Other information if any			
19	UNDERTAKING: I solemnly affirm that the information furnished above is true and correct in all respect to the best of my knowledge. I have not concealed any information. I realize that if any information furnished herein is found to be incorrect or untrue, I shall be liable for civil / criminal prosecution and also forgo my claim for the admission / appointment in the Institute. I am /have not been involved in any kind of criminal and unlawful activities in the past.			

Place:

Date:

Candidate's Signature

List of Enclosures:

1) Application Form	2) SSLC Marks Card for Age Proof.
3) Marks Card of PUC, Nursing / Para-Medical from 1st year to final year.	4) Nursing Council / Other Council / Board Registration Certificate
5) Degree Certificates BSc / MSc or Provisional Certificates.	6) Recent Caste Certificate / Caste cum Income validity Certificate.
7) Physically handicapped certificate.	8) Experience Certificate.
9) Passport size photograph.- 2 Nos.	
NOTE: Application received on other format or received after the last date prescribed for submission, will not be entertained.	