Shree Krishna Educational Charitable Trust's



KRISHNA AYURVED MEDICAL COLLEGE Vadodara



BITS Edu Campus, Vadodara Mumbai NH#8, Varnama, Vadodara 391 240. Gujarat

APPLICATION FORM

Paste your recent Passport size Photograph here and sign across

| cation for the post of | : | Subject : | |
|-------------------------------------|----------------------|-------------------|----------------------|
| Full Name (In bloc | k letters) : | | |
| (Surname) | (Name) | (Fathe | er's /Husband's Name |
| Father's /Husband's | s name - For married | d women only: | |
| Present Address: _ | | | |
| | | | Pin-code: |
| Village / City | Taluka: | Dis | strict: |
| State: | | | |
| Contact No. : [1] E-mail: | | [2] | |
| Date of Birth: | | Place of Birth: _ | |
| Age:Years | Months | _ Days | |

| [; | 5] | Gender : Ma | ale / Female / Other | | | | | |
|------------|-----|---------------------------|---|-----------------|-------|---------------|----------------------|---------|
| [6 | 6] | Marital Stat | t us : Married/Unmarrie | ed | | | | |
| [7 | 7] | Religion: | Nationali | ty: | Γ | omicile:_ | | |
| [8 | 8] | | category belong to (S rtificate from competer | | | • | - | |
| [9 | 9] | | hysically handicapped orse certificate from co | | - | | | |
| [2 | 10] | Mother to | ngue: | | | | | |
| | | Sr. No. | Other Languages Know | rn | Speak | Read | Write | |
| | | 1. | | | | | | |
| | | 3. | | | | | | |
| | | 4. | | | | | | |
| | 11] | | l Qualifications (Start cails, if required) | | | | _ | 1 |
| Sr. No. | Ex | am. Passed | Board/University /Institution | Passing Year | Subj | cipal ects | Percentage/ Grade | Remarks |
|) | | | | | | | | |
| J. | | | | | | | | |
| : | | | | | | | | |
|).). | | | | | | | | |
| ' . | | | | | | | | |
| [: | 12] | | sistered with any reco of registration Board/ | _ | _ | | • | |
| | | Reg. No certificate fr | om competent authori | |) to | | (Att | ach |

| Γ | 13 | Details of Experience: | (Attach se | parate sheet | for more d | letails, if r | eguired) | |
|---|----|------------------------|------------|--------------|------------|---------------|----------|--|
| | | | | | | | | |

| | | Designation | Date | | | Dant Time | |
|------------|-----------------------------------|-------------|------|----|--------------|--------------------------|---------|
| Sr. No. | Name & Address of the employer | | From | То | Pay Scale | Part Time / Full Time | Remarks |
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |
| 4. | | | | | | | |
| 5. | | | | | | | |

| Computer: CCC: CCC | C+ Any other computer qualification: |
|---|--|
| If you have published artic | les or research papers or books, give details: |
| When you join the service if, | , you are appointed? |
| | ement / bond with your present employer? |
| Yes / No : (If yes, attach the copy) | |
| (If yes, attach the copy) Please give name and addrewho can certify your work a | nd conduct. |
| (If yes, attach the copy) Please give name and addre | nd conduct. |
| (If yes, attach the copy) Please give name and addrewho can certify your work a | (2) |
| (If yes, attach the copy) Please give name and addrewho can certify your work at [1] | nd conduct (2) |

[20] Any other relevant Information

[19]

Details of membership of any professional/academic body.______(Attach separate sheet for more details, if required)

| [21] | List of Self attested co | opies of certificates / documents attached : | |
|---------|--|---|--------------------------------|
| | 1 | 2 | |
| | 3 | 4 | |
| | 5 | 6 | |
| | 7 | 8 | |
| | 9 | 10 | |
| [22] | | Public Service Commission / Government / So University / Other College, please provide do | |
| in this | s application are true and ined herein or willful co | solemnly declare that, the particular correct. I clearly understand that, any misstancealment of any materials, facts etc. liable by SKECT's Krishna Ayurved Medical College, V | atement of fact to appropriate |
| | : | Name & Signature of the G | Candidate |
| | | ent / Grant in aid Institute / PSU / University) | te belongs to |
| my kı | nowledge and belief. If cal College, Vadodara. I | ements made by applicant are true and correct He/she will be appointed in the SKECT's Kr He/she can be relieved from this Institute | ishna Ayurved |
| | : | Name & Signature of the Employe | er with Seal |
| Note: | : The application should | be in the candidate's own handwriting. | |

(Attach separate sheet for more details, if required)

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