PRESCRIBED FORMAT FOR THE POST OF , RIMS, IMPHAL

1.	Full Name in Block Letters		Affix recent
2.	Father's /Husband Name		Passport size photograph
3.	Date of birth		
4	Age (as on the last date of sub	omission of application :	
5.	Gender & Marital Status		
6.	Permanent address in full		
7.	Present address with postal co	ode in full :	
8.	Telephone/Mobile No.		
9.	E-mail ID		
10.	Nationality (State whether by	birth or by domicile) :	
11.		aste/Schedule Tribe/ OBC category ?:	
	(if yes please indicate and end	close a copy of the certificate)	

12. Details of Examination passed :

Examination	Name of School/College with address	Name of Board/Council/University	Month & Year of passing	Division/ Class obtained	% of marks obtained
10+2/P.U.C.					
MBBS					
M.D./M.S./ M.Ch./D.M. with speciality					

13. Teaching experience:

(a) Before Post Graduation:

Sl.	Post (s) held	Name of College/Institution	Period of	fservice	Nature of Appointment	Reason of
No.	1 Ost (5) Held Trume of Conege, Historia	From	То	(Regular/Contract)	leaving	
				1		13
				i i		
		and and				±

(b) After Post Graduation:

Sl.		Name of College	Period of	service	Nature of Appointment	Reason of
No.	Post (s) held	From	То	(Regular/Contract)	leaving	
			T.			
		_				

14. Research works & Publications:

SI. No.	Year of publication	Name of Journal indicating Vol. No., Page no.etc.	Title	Indicate whether 1 st Author or Co-author
		K E		
		and the second		

15. Seminar/Workshop/Conference attended:

Sl. No.	Year	Name of event indicating participation level (Paper presentation etc.)	Details of presentation

Name of the book published	Chapter contributed	Year of publication
		4.35
	< _V	
7. Prizes and Awards received:		
1. 2. 3.		
8. Extra Curricular activities		
I.		
2. 3.		
Note: In case the space provided in the format is not suf	fficient a separate statement/sheet may be atta	ached as Annexure.
19.		
DEC	CLARATION	
I, Shri/Shrimati/Kumari		
Declare as under:		
Application for grant of exemption iv) That I have entered into and correct of my spouse. Application for grant of exemption in the spouse of my spouse.	one spouse living. acted a marriage with a person having on is enclosed. attracted a marriage with another person	
knowledge and belief. In the e	ntries made in format are true and corevent of any information being found be terminated without any notice.	
Station:	Sig	gnature:
Date:	Full name of	of the applicant:
List of documents enclosed:		
List of documents enclosed: 1. 2.		

4.

NO. OBJECTION CERTIFICATE

Certified that		is working as
on regu	ular / contract basis in the (PB+GP)	
in the pay of P.B. Rs	+ G.P. Rs	
	has no objection to his / her applying for, RIMS, Imphal.	the post of
Further, certified that in cas of this Institute /College.	e if he / she is appointed, he /she will be released from	om the service
Date:	Signatute	
	Head of the Institute	/College
	Name:	
	Designation:	
	Institute /College:	
	Seal	