



Government of Karnataka

BIDAR INSTITUTE OF MEDICAL SCIENCES, BIDAR.

(Autonomous Institution of Govt. of Karnataka)

Affiliated to Rajiv Gandhi University of Health Sciences,
Karnataka, Bangalore & Recognised by Govt. of India, New Delhi

Phone: 08482 228366 / Fax No: 08482 240322.

Website: www.brim-s-bidar.in & Email-ID : director@brims-bidar.in

APPLICATION FOR THE POST OF: PROFESSOR/ASSOCIATE PROFESSOR/ASSISTANT PROFESSOR/SENIOR RESIDENT/LMO.

Post Applied for: _____.

1	Name of the candidate (in CAPITAL LETTERS)	
2	Subject	
3	Qualifications	
4	Sex	
5	Category, SC/ST, Cat- I/IA/IIA/IB/IIB/IIIA /IIB/GM Specify with relevant recent certificates	
6	Hyderabad Karnataka local person (Bidar, Kalburagi, Bellary, Koppal, Raichur and Yadgir)	Yes / No
7	If yes, Eligibility Certificate issued Assistant Commissioner, Revenue Department	Yes / No
9	Nationality	
10	Postal address for correspondence	
11	Mobile No	
12	E-mail ID.	
13	Name of Father / Mother / Husband / wife	
14	Date of Birth (enclose copy of SSLC certificate) Age:	
15	Whether studied in Kannada Medium or 1 st or 2 nd language as Kannada upto SSLC.	Yes / No
16	Particulars of registration with State Medical Council to be furnished along with PG registration date (Compulsory)	

17	Details of the Qualifications :					
Sl No	Qualification	Marks	Percentage	Year of Passing	Name of College	Name of University
18	Experience					
	Designation	Period		Total years of Experience	Name of College	
		From	To			
	Tutor/Demonstrator/Resident					
	Assistant Professor/Lecturer					
	Associate Professor					
	Professor					
19	Present employment status					
20	If in Govt. Service NOC has to be obtained from the Head of the Institute / Competent authority			Enclosed-Yes/No		
21	Higher qualification if any & year of passing, Whether recognized by MCI or not					
22	Papers Presented in National Conference(s) International Conference(s) (in chronological order)			International :	Certificate enclosed: Yes/No	
				National :	Certificate enclosed: Yes/No	
23	Original Research Articles/Papers Published in National Indexed Journal(s) International Indexed Journal(s) Only 1 ^s author or corresponding author			International:	Publications enclosed: Yes/No	
				National:	Publications enclosed: Yes/No	
24	WHO fellowship in the same subject					
25	University Gold Medal (if any)					
26	Any other information					
27	DD details (Number, Date and Bank)					

I certify that the above Information is correct and complete to the best of my knowledge and nothing has been concealed/ distorted also certify that there are no criminal cases against me, I have not been debarred from exams/dismissed from service/black listed by MCI/KMC. If I am found to have concealed/distorted/factually submitted wrong information, my appointment shall be liable to termination without notice/compensation. I shall not claim TA/DA or any compensation for attending the interview.

Place:

Date:

Signature of Candidate