

Application Form

Advertisement No: AIIMS Bhopal/CFM/Projects/SK/ ICMR HTN self-care/01-03

Project Title: “*Self-management interventions to improve hypertension control: A mixed method implementation study*”

Post applied (Tick Appropriate Post):

- i. Senior Medical Officer**
- ii. Social Worker**
- iii. Data Entry Operator**

- 1. Full Name (in capitals):
- 2. Father’s name:
- 3. Date of birth:
- 4. Gender:
- 5. Nationality:.....
- 6. Do you claim any age relaxation? (If yes, bring the proof for the same at the time of examination / interview)
- 7. Address for correspondence with Pin code:

10 digit Mobile No.:

E-mail:.....

- 8. Permanent address with Pin code:

9. Educational/Professional qualifications (graduation onwards for Senior Medical Officer, 12th Class onwards for Social Worker, 10th class onwards for DEO)

S. No	Examinations Passed	University or Board	Subjects taken	Year of passing	Percentage of marks	Class/ Division/ Grade

Please bring the filled in application form on the day of examination/ interview.

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10. Details of previous experience: (Current occupation first)

S. No.	Name of the post held	Employer/Organization and nature of employment	Pay scale/salary drawn	Period		Nature of duties
				From	To	

11. Any other relevant information you wish to add related to field work experience, etc. (Use separate sheets if necessary)

DECLARATION

I hereby declare that the information furnished above is true, complete and correct to the best of my knowledge and belief. I understand that in the event of my information being found false or incorrect at any stage or any attempt has been made by me to willfully conceal or misrepresent the facts, my candidature/appointment shall be liable to be cancellation/termination without any notice or compensation in lieu thereof.

Place:.....

Signature of the candidate

Date:.....

Please bring the filled in application form on the day of examination/ interview.