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ANNEXURE

Proforma of application for the post of Auxillary Nurse Midwife in the Department of Preventive and Social Medicine, JIPMER, Pondicherry-6.

1. Name in Block Letters :
2. Father's Name :
3. Date of Birth in Christian era and :
Age as on 23.08.2018 :
4. Sex : Male/Female
5. Nationality :
6. Religion :
7. Category : UR/ OBC/ SC/ ST
8. Address for communication including Pin code, in caps with Telephone No; if any

										Pincode:														
										Phone No.														

E-mail Id (if any): _____

9. Educational qualifications from Matriculation /SSLC:

Sl.No.	Educational qualifications (From SSLC/Matriculation)	Subjects	Marks Obtained	Year of Passing	Name of the Board of University

10. Experience(in years) in years(certIFICATE to be attached):

11. List of Enclosure: 1. 2. 3.

Declaration

I _____ hereby declare that the statements made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect or ineligible and detected before or after exam/Interview, I hereby convey my consent for cancellation of my Candidature.

Place:

Date:

Signature of Candidate
