

DELHI CANTONMENT BOARD
CANTONMENT GENERAL HOSPITAL
SADAR BAZAR, DELHI CANTT-110010.

APPLICATION FORM

1. Post Applied for: _____

2. Applicant's Full Name (in Block Letters):

3. Date of Birth and Age (as on Last Date of Application):

4. Nationality:

5. Whether Reserved Category General/SC/ST/OBC/PH/OTHER:

6. Details of the Current Employment:

(Those already working are required to apply through proper channel with no objection certificate from the current employer. They can send an advance copy of application as well)

7. Details of Examination Passed:

S.No.	Examination/Degree	Board/University	Institution/College Name	% age of Marks

8. Medical/ Dental/Nursing/ Pharmacy Council Registration No.

9. Experience:

Name of Post	Institution	Period (From-to)	Remuneration
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Affix
PP Size
Self-attested
Photograph

10. Research work or publication (if any):

11. Prize/Medals (if any):

12. Family Details:

	Name	Age
Father		
Mother		
If Married:		
Husband/ Wife:		
Children		
(1)		
(2)		
(3)		

13. Address (in Full):

a. Correspondence/ Current Residence:

b. Permanent:

c. Mobile No.

Phone No. (Landline):

Aadhar No:

E-mail ID (in capital letters):

14. List of Enclosures:

Note:

- A. Attested copies of all testimonials must be enclosed.
- B. Additional pages may be added wherever required.

Declaration by the Candidate:

- (i) I solemnly declare that all statements made in this application are true, complete and correct to the best of my knowledge and belief and in the event of any information being found false or incorrect or any ineligibility being detected before or after the test, my candidature is liable to be cancelled and legal action may be initiated against me.
- (ii) I fulfil all conditions of eligibility regarding age limit, educational qualification etc. I have enclosed self-attested photocopies of certificates in support of my claim for Qualifications, Experience, Age, Category (SC/ST/OBC) and Age relaxation etc.
- (iii) I also declare that I have never been convicted by any court of law.
- (iv) I also declare that I do not belong to creamy layer section of persons of OBC. *(strike out if candidate does not belong to OBC/ if not applicable).
- (v) I agree to the terms and conditions as given in the advertisement and the website for the post applied for.
- (vi) I understand that in case I am selected, my employment shall be contractual and I shall not claim regularization of service on any behalf.
- (vii) In case my application is not received within the stipulated date due to postal delay or otherwise, Delhi Cantonment Board/ Cantonment General Hospital will not be responsible for such delay.

Date: -----

Place: -----

Name & Signatures of the Candidate