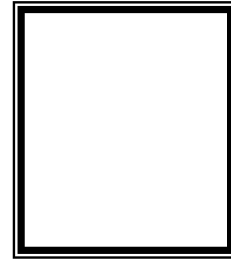


**APPLICATION FORM FOR HIRING OF STAFF UNDER
NATIONAL HEALTH MISSION, J&K.**

1. Post applied for. _____
2. Name of Candidate _____
3. Parentage _____
4. Date of Birth _____
5. Permanent Address _____
6. E-mail/ Contact No. _____
7. Details of Qualification: (Graduation Year Wise)



Examination Passed	Board/University	Year of passing	Marks Obtained	Total marks	%age

8. Date of completion of internship _____
9. Registration No. _____
10. Experience if any:
Duration _____ years _____ Months

11. I do hereby declare that
 - I. The Statement in this application is true to the best of my knowledge and belief.
 - II. I have never been debarred from appearing at any examination/ interview.
 - III. I have never been prosecuted or involved in any criminal case registered by the police or convicted by the criminal court.
 - IV. I shall accept the selection made by the selection committee, which will be binding on me.

I undertake that any willful concealment of the facts shall result in the cancellation of my candidature and may also result in debarring me from applying for future selection.

Signature of applicant.