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

Date of completion of internship		Examination	Board/University	Year of	Marks	Total	%age
Registration No Experience if any: Duration yearsMonths I do hereby declare that I. The Statement in this application is true to the best of my knowledge and belie. I have never been debarred from appearing at any examination/interview. I. I have never been prosecuted or involved in any criminal case registered by convicted by the criminal court.		Passed		passing	Obtained	marks	
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