ANNEXURE-A

DAMODAR VALLEY CORPORATION
APPLICATION FOR THE POST OF GDMO
ON CONTRACT BASIS

TO BE PRODUCED AT THE TIME OF WALK-IN-INTERVIEW

Paste yourrecent pass port size (size 3.5 x 3.5cm) photograph (not older than three months) duly self-attested

1. Employment Notification No.: **PLR/GDMO (Contractual)/2024/10/03** **Date:27/10/2024**

2. Name of the Post & Post No.**:** **GDMO (Contractual), Post No. 2024/C10**

3. Name of the Applicant in Full: _____

(In Block Letter & as appearing in Class Xth Certificate)

4. Father's/Spouse's Name : _____

5. Date of Birth:

D	D	M	M	Y	Y	Y	Y

6. Gender (Pls. put a tick) :

Male	Female	Others

7. Category (Pls. put a tick):

UR	OBC	SC	ST	EWS	PwBD	Ex-SM

8. Whether PWD (Yes/No), If Yes, Type of Disability: _____

9. Email ID: (In the capital letters) _____

10. Mobile No.: _____ Alternate Mob No:_____

11. **Correspondence Address:**

House No. /Street name _____

P.O. _____ City/Town _____

District _____ State _____

Pin Code _____ Nearest Railway Station _____

12. **Permanent Address:**

House No./Street name _____

P.O. _____ City/Town _____

District _____ State _____ Pin Code _____

Landline No.(if any) _____

13. Marital Status : _____

14. Nationality : _____

15. **Qualifications:**

Sl. No.	Name of the Exam	Name of the Board /Medical College/ University	Whether Full Time Regular Course (Please state YES or NO)	Major Subjects taken/ Specialization	Year of Passing	% marks in aggregate (not to be rounded off)
1.	Class X					
2.	Class XII					
3.	MBBS					
4.						
5.						

Medical Council Registration No.: ----------

16. **Experience Details:**

Sl. No.	Post/ Designation Held	Name of the Hospital/ Nursing Home/ Organization	Period of Work		Nature of Duties
			FROM	TO	
1.					
2.					
3.					
4.					

17. Visible marks of identification (Mole marks/Wound/Scar/Burn etc,): _____

18. Is there any Disciplinary/Criminal/Civil/Vigilance proceeding pending against you?

If yes, give the details: _____

Note: Add extra sheets if required.

DECLARATION

I hereby declare that all the particulars furnished above in this application are true and correct to the best of my knowledge and belief. In case any information given in this application being found false, incomplete, incorrect or concealing the fact, my candidature may be cancelled at any stage without any notice and without assigning any reason thereof even after joining.

Place: _____

Date: _____

(Signature of the Applicant)

(Name of the Applicant)