

**GUJARAT MEDICAL EDUCATION AND RESEARCH SOCIETY,  
 "O"- Blok, 4<sup>th</sup>Floor, Civil Hospital Campus, Opp. Pathikashram, Sector- 12  
 Gandhinagar-382012**

Affix Passport  
 Size Photograph  
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**APPLICATION FORM**

**For the post of Professor/Associate Professor/Assistant Professor for 11-month  
 Contractual Fix pay appointment  
 at GMERS Medical College, .....**

1. Post Applied for in (Subject): \_\_\_\_\_
2. Name of Candidate in full: \_\_\_\_\_  
 &Address \_\_\_\_\_  
 (In BLOCK LETTERS)  
 TelephoneNo.withcode: (Phone) (Mobile) \_\_\_\_\_  
 Email ID: \_\_\_\_\_
3. Date of Birth : \_\_\_\_\_ Age:- .....(Yr) .....(Month)
4. Sex : Male/ Female
5. Present Job : Govt. / Others \_\_\_\_\_ If Govt.: Regular/ Ad-Hoc
6. Whether CCC+Exam Passed? Yes/ No
7. Educational Qualification :

Sr. No.	Examination	Year of Passing	University	Total Marks	Percentage	Attempt	For Office use(Score)
1	FINALMBBS/ BDS (part II only)						
2	MD/ MS/ MDS						

**8. Details of Teaching Experience:**

Sr. No.	Teaching Post Held	Name of Institution	Dates		Total Period		For Office use (Score)
			From	To	Years	Months	
<b>Total Teaching Experience-</b>							

9. Details of Research Publications:

Sr. No.	State/ National / International Journal	Name of Article (attach list separately)	Date of Publication / acceptance for publication	Name of Journal	Name of Index Whether Journal is Indexed certify	For Office use (Score)
1	2	3	4	5	6	7

10. Details of Medical /Dental Council Registration:

Registration No. MBBS/BDS & P.G. \_\_\_\_\_  
Date of Registration: MBBS/BDS & P.G. \_\_\_\_\_  
Name of Council: Graduation & P.G. \_\_\_\_\_

11. Name of two referees. (With Phone No.) 1. \_\_\_\_\_  
2. \_\_\_\_\_

12. Check List of Enclosures (attested photocopies- in following order)

(1) FINAL MBBS/BDS Mark Sheet.	<b>please tick(✓)</b>	(6) MS/MD/MDS/D.M./M.Ch.- GMC/GDC Registration Certificate.	<b>please tick(✓)</b>
(2) FINAL MBBS/BDS Attempt Certificate.		(7) MBBS Degree/ PG Certificate	
(3) P.G. MARKSHEET		(8) Teaching Experience Certificate	
(4) P.G. Attempt Certificate.		(9) School-Leaving certificate/ Birth Date Certificate	
(5) MBBS/BDS; GMC/GDC Registration Certificate.		(10) Research Publication (original copy and photocopy) with a proof of Indexation.	

**Undertaking**

I declare that information stated above are true certificate, complete to the best of my knowledge. If above Information is found to be false; I am bound to obey the decision of Selection Committee of GMERSociety, Gandhinagar.

Place: \_\_\_\_\_

Date:-

**Signature of Applicant**