

Smt. Shantaben Haribhai Gajera Charitable Trust Managed

# Shantabaa Medical College

(A PPP Project with Govt. of Gujarat)

Civil Hospital Campus, B/H S T Bus Station, Lathi Road, Amreli-365601

Email: recruitment@smcgh.edu.in, Web: www.smcgh.edu.in

## APPLICATION FORM-2019-20

Affix your  
Passport size  
Photograph

For Office use	

1. Post Applied for: \_\_\_\_\_, in Subject of : \_\_\_\_\_
2. Name of Candidate: \_\_\_\_\_
3. Address: \_\_\_\_\_  
\_\_\_\_\_, Contact No. (M) \_\_\_\_\_, Email: \_\_\_\_\_
4. Category : SE / ST / SEBC / GENERAL
5. Date of Birth: \_\_\_\_\_, Age: \_\_\_\_\_ years, \_\_\_\_\_ Months
6. Sex: \_\_\_\_\_
7. Educational Qualifications:

Sr. No.	Course / Examinations	Passing Year	University	Total Marks	Percentage	Attempt	For Office Use
1	MBBS						
2	MD/MS						
3	DNB						
4	PG Diploma						
5	DM/MCH						
6	M.Sc. (Medical)						
7	PhD (Medical)						

8. Details of Teaching Experience:

Sr. No.	Teaching Post Held	Name of Institute	Dates		Total Experience		For Office Use	
			From	To	Years	Months		
1								
2								
3								
4								
5								
6								
7								
<b>Total Teaching Experience</b>								

9. Details of research publications:

Sr. No.	State/ National/ International Journals	No. of Papers Published	Year of Publication	Journal Name	Whether Journal is Indexed? (Yes/No)	Name of Articles (Attach list separately)	For Office Use
1							
2							
3							
4							

10. Details of Medical Council Registration:

Particulars	U.G.	P.G
Registration No.		
Date of Registration		
Name of Council		

11. References with Contact No. :

Sr. No.	Name	Designation / Institute / Organization	Contact No.
1			
2			

12. List of Enclosures: (Tick mark attached one)

- Final MBBS Mark Sheet
- Final Attempt Certificate
- P. G. Mark Sheet
- P. G. Attempt Certificate
- MBBS Council Registration Certificate.
- MS/MD Council Registration Certificate.
- Degree certificate (UG/PG)
- Teaching Experience Certificate
- Caste Certificate (Applicable to only domicile of Gujarat)
- Birth certificate / School Leaving Certificate
- Research Publications (with a proof of indexation)
- Photo ID Proof. (PAN Card, AADHAR Card)
- Internship Completion certification.

**UNDERTAKING**

I, \_\_\_\_\_ (name) declare that information provided above are true to the best of my knowledge, if above information is found to be false/wrong, I am bound to obey the decision of selection committee.

Place:

Date:

Name & Signature of Applicant