

Application Format

Paste here your
passport size
photograph

Name of the Post: Hospital Administrator under Hospital Management Society, GMCH

1. Name (In Block Letters).....
2. Father's/Spouse's Name
3. Date of Birth:
4. Age in completed years (as on 01.01.2023)
5. Sex: Male / Female
6. Category GEN/SC/ST/OBC/PH
(Enclose proof of caste certificate issued by the competent authority)
7. Address
8. Mobile Number.....
9. E-mail ID.....
10. Essential Qualification:

Sl. No.	Exam passed	Board /University	Year of passing	% of Marks

11. Experience:

Sl. No.	Name of the Employer	Nature of Duties	Date of Joining	Date of Leaving

Note: Full particulars along with postal address with PIN Code, E-mail, Contact No., one passport size photographs and self attested copies of Marks sheets, Certificates of Educational Qualifications (from 10th standard onwards) & Experience Certificates (current working experience certificates also) should be attached with the application.

DECLARATION

I hereby declare that the information furnished above is true, complete and correct to the best of my knowledge and belief. I understand that in the event of any of the information provided by me are found false or incorrect at any stage; my candidature/appointment shall be liable for cancellation/termination without notice or any compensation in lieu thereof.

Place:

Signature of the Candidate

Date: