#### ALL INDIA INSTITUTE OF MEDICAL SCIENCES, BHOPAL

Project Title:	"A multidisciplinary comprehensive study to assess the impact composition of forest flora and fauna, and its impact on gene being of forest fringe communities of the area demarcated for transportation road from Jayant to Morwa under NCL"	ral and mental health well-
Post applied	for:	
A. PERSON	AL DETAILS	
1. NAME:	Passport size	
2. FATHER'S	photograph with signatures	
3. DATE OF	across	
	AGE (as on the date of interview/skill test)	
4. NATIONA	ALITY:	
5. GENDER:		
6. MARITAL	L STATUS:	
7. REGISTRA	ATION NO.(If applicable):	
8. CATEGOR	RY: Gen/ OBC/ SC/ ST/ EWS/ PH	
B. CONTAC	CT DETAILS	
1. CORRESP	PONDENCE ADDRESS:	
2. CITY/ DIS	TRICT:	
3. STATE:		
4. COUNTRY	Y:	
5. PINCODE	:	
6. PHONE N	UMBER (including Mobile no.):	
7. EMAIL ID	»*:	

\* this email ID shall be used for all correspondence

# C. EDUCATIONAL QUALIFICATIONS (10<sup>th</sup> onwards)

S.No.	Course Name	Speciality (If Applicable)	College/Institute/University	Year	Subject	Marks Obtained	Total Mark s	%

#### D. PROFESSIONAL EXPERIENCE

S.No.	Designation (Nature of appointment-regular/contractual)	College/Institute	From	То	Total Exp.	Salary

### E. PUBLICATIONS

## List your publications if any

S No.	Publication Details
5 110.	Tubilcation Details
F. Awa	rds, Distinction & Prizes, Paper Presentation, If Any
1.	
2.	
3.	
3.	
G. Decla	aration
	declare that all the statements made in this application are true, complete and correct to the
	my knowledge and belief. In the event of any information being found false or incorrect
detected	at any stage, I hereby convey my consent for cancellation of my candidature.
	Characteria of Con 1114
	Signature of Candidate
Place:	
Date:	