

Baba Farid University of Health Sciences, Faridkot

Sadiq Road Faridkot – 151203 (Pb) India

**Application form
Walk-in-interview (Guest Faculty)**

Add 14 of 22

Date of interview: 14.12.2022

Details of Application fee

DD No. Date and Amount

Affix Attested
Passport size
Photograph

Note: 1. **Incomplete applications are liable to be rejected.**

1. Application for the post of _____ in _____
(Subject/Specialty)
2. Applicant's Name (IN BLOCK LETTERS)

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3. Father's Name (IN BLOCK LETTERS)

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4. i) Date of Birth of Applicant (attach proof)
- | | | | | |
|-----|-------|------|--|--|
| | | | | |
| DAY | MONTH | YEAR | | |
- ii) Age: (as on 01.01.2022)
- | | | | |
|-------|--------|------|--|
| | | | |
| YEARS | MONTHS | DAYS | |

5. Write in the box ONLY ONE category out of SC/ST/BC/GEN To which you belong (attach proof if SC/ST/BC):
-

6. Nationality: _____ 7. Religion _____ 8. Marital Status; _____ 9. Sex _____

10. Educational/Academic Qualification: (attach attested copies of certificates)

| Examination Passed | Year of passing | Marks obtained/Max marks | Percentage | No. of attempts | Institution Name |
|--------------------|-----------------|--------------------------|------------|-----------------|------------------|
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11. No. of papers published : National International
- (please attach proof)**

12. Details of prizes, Medlas, Scholarships & National/ International Awards and Additional Qualification such as membership of scientific society etc.

13. Chronological details of upto date appointments after obtaining qualification (attach experience certificate):

| Post held | From | To | Total period | Employer's address |
|-----------|------|----|--------------|--------------------|
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14. (a) Central/State Council with which the applicant is registered (attach proof) : _____

(b) Registration Number :- _____

15. Punjabi upto Matric standard (Y/N) :- _____

| 16. Permanent Address | | | | | 17. Correspondence Address | | | | |
|-----------------------|--|--|--|--|----------------------------|--|--|--|--|
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| Pin Code | | | | | Pin Code | | | | |
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| Email: | | | | | E. Mail | | | | |

Mobile No.

18. Details of enclosures attached: 1. _____ 2. _____ 3. _____

4. _____ 5. _____ 6. _____ 7. _____ 8. _____

I hereby declare that I am Indian National and all statements made in this application are true, complete and correct to the best of my knowledge and belief.

Date: _____

Place: _____

Signature of the applicant