

**Baba Farid University of Health Sciences, Faridkot**

Sadiq Road Faridkot – 151203 (Pb) India

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

**Add 07 of 22**

**Date of interview: 06.07.2022**

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)

3. Father's Name (IN BLOCK LETTERS)

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 |
|--------------------|-----------------|---------------------------|------------|-----------------|------------------|
|                    |                 |                           |            |                 |                  |
|                    |                 |                           |            |                 |                  |
|                    |                 |                           |            |                 |                  |
|                    |                 |                           |            |                 |                  |

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 |
|-----------|------|----|--------------|--------------------|
|           |      |    |              |                    |
|           |      |    |              |                    |
|           |      |    |              |                    |
|           |      |    |              |                    |

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                   |  |  |  |  |  |
|                       |  |  |  |  |  |                            |  |  |  |  |  |
| <b>Email:</b>         |  |  |  |  |  | <b>E. Mail</b>             |  |  |  |  |  |

**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