

**Dr. B.R. Ambedkar State Institute of Medical Sciences,
Sector 56, SAS Nagar (Mohali), Punjab.
Application Form (Faculty)**

** This is a fill-able form and needs to be filled in computer.*

This form needs to be uploaded online at the link provided on website.

Name of Applicant															
Fathers Name															
Gender	Male				Female				Others						
Date of Birth							Mobile Number								
Address Line 1															
Address Line 2															
District					State					Country					
Department applied for															
MBBS College															
MBBS University															
MBBS Passed in year															
Number of Attempts to Pass MBBS															
MBBS: Percentage of total Marks Obtained in all prof's															
MD/MS College															
MD/MS University															
MD/MS passed in year						Speciality									
Number of Attempts to Pass MD/MS															
MD/MS percentage of Total Marks obtained															
		<i>Please fill as '50', if grades were awarded instead of marks.</i>													
Additional Qualification															
Additional Qualification University															
Additional Qualification Passing Year															
Medical Council Registration State					Registration No					Registration Valid upto					
Teaching experience as senior resident (or equivalent) with respective dates. Please Specify college/Institution name with respective dates															
Teaching experience as Assistant Professor (or equivalent) with respective dates <i>Please Specify college/Institution name with respective dates</i>															
Teaching experience as Associate Professor (or equivalent) with respective dates <i>Please Specify college/Institution name with respective dates</i>															
Teaching experience as Professor with respective dates <i>Please Specify college/Institution name with respective dates</i>															

Post Applied for												
Professor on Re-employment basis												
Associate Professor on Re-employment basis, and retired as Professor												
Associate Professor on Re-employment basis, and retired as Associate Professor												
Associate Professor on Deputation, currently working as Associate Professor												
Associate Professor on Deputation (Provisional Promotion), currently working as Assistant Professor <i>(Candidate must be eligible as per MCI requirements)</i>												
Assistant Professor on Deputation, currently working as Assistant Professor												
Assistant Professor on Deputation (Provisional Promotion), currently working in State/Centre Civil Medical Services (e.g, PCMS, HCMS, HPCSM, RCMS etc) having done senior residency/tutor/demonstrator/registrar in respective subject <i>(Candidate must be eligible as per MCI requirements)</i>												
Retirement Details for Retired Candidates												
Have you retired from recognized Government Medical College? <i>Retired army personnel should mark as 'NA'</i>							Yes		No <i>(Not eligible)</i>		NA	
Institute/College Name Retired from												
Institute (District)							Institute (State)					
Designation at Retirement							Date of Retirement					
Pay Scale and pay band at Retirement								PPO No				
Details to be filled by Regular Government Employees (Deputation Candidates)												
Are you working at a Government institution/Department							Yes		No <i>(Not eligible)</i>			
Institute/Department Name												
Institute/Department Address												
Service merit No							Date of Joining Service					
Pay Scale and pay band							Probation cleared		Yes		No	
Current Employment Details												
Current institute/College Name												
Current institute (District)							Current Institute (State)					
Current Designation			Last MCI inspection attended as (Designation)									
Last MCI inspection attended on												
Date of Joining at Current Designation												
For retired army personnel												
Date of Retirement												
Last Post held												
Last Headquarter/college/Institute												
I agree to submit documents and details of equivalent teaching experience							Yes		No <i>(Not eligible)</i>			

Undertakings												
I agree to submit an affidavit that I have not appeared for the MCI inspection for the year academic 2020-21. <i>Please select one option. Applicant shall be required to submit an affidavit at the time of interview.</i> <i>Retired army personnel should mark as 'NA'</i>							Yes					
							No (Not eligible)					
							NA					
Have you informed the Principal/employed of your current institute that you are applying for this post? <i>Please select one option. Applicant shall be required to submit No Objection Certificate at the time of interview.</i> <i>Retired army personnel should mark as 'NA' if not applicable to them, being not on teaching position.</i>							Yes					
							No					
							NA					
I agree to bring No Objection Certificate for deputation from the Principal of current institute at the time of interview. <i>Please select one option. Applicant shall be required to submit No Objection Certificate at the time of interview.</i> <i>Retired army personnel should mark as 'NA' if not applicable to them, being not on teaching position</i>							Yes					
							No					
							NA					
I agree to bring Certificate from the Principal of current institute at the time of interview that I have not appeared for MCI inspection for the academic year 2020-21. <i>Please select one option. Applicant shall be required to submit No Objection Certificate at the time of interview.</i> <i>Retired army personnel should mark as 'NA' if not applicable to them, being not on teaching position. However if Army personnel was on the teaching position in a medical college prior to applying, he/she should select one of the other options.</i>							Yes					
							No					
							NA					
Have you ever been disqualified by Union Public Service Commission/or any other Authority? * <i>If Yes give details and attached with application form</i>						No				Yes (Please provide details below)		
Have you ever been convicted by Criminal Court? <i>If Yes, what was the punishment given and attach details with application</i>						No				Yes (Please provide details below)		
Whether there is any Criminal case pending/ registered against you? <i>if yes, please attach present status of the case with application</i>						No				Yes (Please provide details below)		
Fee Payment Details												
Online Application Fee Payment Transaction number * <i>Applicants need to submit fees by online bank transfer with SBI Bank, Phase VI Mohali</i> <ul style="list-style-type: none"> • Account of : Dr B R Ambedkar State Institute of Medical Sciences, • Account Number: 3927 6723 197 • IFSC Code: SBIN0017918 • Prefix 5078000008. <i>Fees should not be submitted in cash. Reference number generated after online payment transfer should be saved and mentioned here</i>												
Transaction number						Amount deposited						
Deposit Date												
						Deposit Time						

Details of best publications to be provided below*(4 for Professor, 2 for Associate Professor & optional for Assistant professor)***Publication 1: Title of Article**

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Publication 1: Name of Journal

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Year of Publication					Volume (issue)		Page Numbers		
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Indexing of Journal in year of publication (Copy to be attached)

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Publication 1: Authorship number

Write '1' if you were the first author, white '2' if you were the second author and so on

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Publication 2: Name of Journal

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Year of Publication					Volume (issue)		Page Numbers		
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Indexing of Journal in year of publication (Copy to be attached)

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Publication 2: Authorship number

Write '1' if you were the first author, white '2' if you were the second author and so on

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Year of Publication					Volume (issue)		Page Numbers		
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Indexing of Journal in year of publication (Copy to be attached)

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Publication 3: Authorship number

Write '1' if you were the first author, white '2' if you were the second author and so on

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Year of Publication					Volume (issue)		Page Numbers		
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Indexing of Journal in year of publication (Copy to be attached)

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Publication 4: Authorship number

Write '1' if you were the first author, white '2' if you were the second author and so on

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I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. If event of any information being found false or incorrect or ineligibility being detected before or after the selection, action may be taken against me by the Department/Government, which may result in my disqualification, cancellation of candidature and / or removal from the service, if selected

Date									
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* Please take print of this email and bring this along at the time of interview.