Application Form

Advertisement No: AIIMS Bhopal/CFM/Projects/SK/ ICMR HTN self-care/

•	ect Title: "Seij-mana nod implementation si	J	uons to improve	nypertensi	on control: A	mixea 				
Post	applied: Senior Med	dical Officer								
Mod i. ii.	le of interview desire Onsite (dept of Cl Online		Paste Your Photo							
1. I	. Full Name (in capitals):									
2. I	2. Father's name:									
3. I	3. Date of birth:									
4. (4. Gender:									
5. 1	Nationality:					•••				
6. Do you claim any age relaxation? (If yes, bring the proof for the same at the time of examination/interview)										
7. A	Address for correspon									
	10 digit Mobile No E-mail:).:								
8.	8. Permanent address with PIN code:									
	lucational/Professiona	al qualifications (graduation onwa	rds for Sen						
S.	Examinations Passed	University or Board	Subjects	1	Percentage of marks	Class/ Division/ Grade				
INO	Tasscu	Of Board	taken	passing	Of marks	Grade				

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Project Title: "Self-management interventions to improve hypertension control: A mixed method implementation study"

10. Details of previous experience: (Current occupation first)

S. No.	Name of the post held	Employer/Organization and nature of employment	Pay scale/salary drawn	Period		Nature of duties
				From	То	

11. Any other relevant information you wish to add related to fieldwork experience, etc. (Use separate sheets if necessary)

DECLARATION

I 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 my information being found false or incorrect at any stage or any attempt has been made by me to conceal or misrepresent the facts willfully, my candidature/appointment shall be liable to be canceled/terminated without any notice or compensation in lieu thereof.

Place:	Signature of the candidate
Date:	