Project Title: "A study to assess morbidity, mortality and treatment-seeking behavior among snakebite (poisoning) victims and to develop interventional strategies to improve snakebite management among tribal population in selected district of Madhya Pradesh: A Mix-Method Study"

Adve	ertisement No: AIIMS Bl	nopal/CFM/Projects	/DrPP/ICMR-Sna	kebite Triba	al Project/04							
Post		Paste your recent										
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1. ]	Full Name (in capitals	):		•••••								
2. ]	2. Father's name:											
3. ]	Date of birth:											
4.	. Gender:											
6.	Nationality: Do you claim any age	relaxation? – Yes	/No									
<ul><li>(If yes, specify the category and attach the proof for the same with the form.)</li><li>7. Address for correspondence with Pin code:</li></ul>												
10 digit Mobile No.:   E-mail:   8. Permanent address with Pin code:												
<u>9.</u>	Educational/Professio	-	,	,								
S. No	Examinations Passed	University or Board	Subjects taken		Percentage of marks	Class/Division/ Grade						

## **Application Form**

Project Title: "A study to assess morbidity, mortality and treatment-seeking behavior among snakebite (poisoning) victims and to develop interventional strategies to improve snakebite management among tribal population in selected district of Madhya Pradesh: A Mix-Method Study"

10. No. of Research Paper in Science Citation Indexed (SCI) journal *(Applicable only for the post of Research Associate-I)* 

11. 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	

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

.....

## DECLARATION

I hereby 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 willfully conceal or misrepresent the facts, my candidature/appointment shall be liable to be cancellation/termination without any notice or compensation in lieu thereof.

Place:....

Signature of the candidate

Date:....