

## ALL INDIA INSTITUTE OF MEDICAL SCIENCES, JODHPUR

## Website: http://www.aiimsjodhpur.edu.in

Advertisement No.					AIIMS/JDH/M.S. Office/04/2019												_, , , ,				
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Name of the Post					on-Academic Junior Resident (Clinical)													_	-		
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2. Father's Name	1	/														1					
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5. E-Mail Id (IN BLOCK LETTERS ONLY)																					
6. Phone / Cell No. Alternate Number (Mobile /	Telej	pho	ne)	_	9 9	1 1															
7. Date of Birth (Please Attach Document for Evidence)DDM						Y	Y	Y	8. Nationality 9. State to which you belong						ng						
10. If Physically Challenged Candidate						Type of Handicap % of Di								Disa	ability:						
11. Category (Please Tick Only)						UF	ł		OBC				9	SC			ST				

12. Details of Educational Qualifications								
Examination Passed	University / Board / Institution / Council of Examination	Month, Year of Passing	No. of Extra Attempts					
Secondary (10 <sup>th</sup> )								
Senior Secondary (12 <sup>th</sup> )								
MBBS								
Any Other								

13.Work Experience (if any)																	
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14. Publication	Index National Journal	Index International Journal
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15. If Selected, specify the minimum required time to join		/

Bring the original and attested photocopies of related documents and publications at the time of Interview.

## Place: \_IODHPUR (RAJASTHAN)\_

Date: \_**16/04/2019** 

Signature of the Candidate