

Govt. of Jharkhand
Jharkhand State AIDS Control Society
Dept. of Health & Family Welfare
Sadar Hospital Campus, Purulia Road, Ranchi
Tel/Fax – 2211018, Website – www.jsacs.org.in

Post Applied for:-

1. Full Name (In Block Letters) :
2. Father's Name:
3. Date of Birth:
4. Address for correspondence (With PIN code):

Affix recent
passport size
colour photograph
with signature
covering the
application and
photo

5. Permanent Address (With PIN code):

6. Mobile No:

7. Email ID:

8. Category (ST/SC/BCI/BCII/GEN/Others):

9. Gender (Male/Female):

10. Marital Status (Married/Unmarried):

11. Nationality:

12. Language known:

13. Aadhar No:

14. Educational Qualification:

Examination Passed	Name of the Institute/University	Subject Studied	Month & Year of Passing	% of aggregate mark

15. Professional Qualification:

Examination Passed	Name of the Institute/University	Subject Studied	Month & Year of Passing	% of aggregate mark

16. Particulars of Experience:

Name of the Department /Organization served	Designation	Period of Service		Experience		Exact Job Responsibilities
		From	To	Years	Months	
Total Experience						

NOTE:- Enclose Self Attested Copies of:

- a) Proof of Age
- b) Educational & Professional Qualifications Certificates.
- c) Experience Certificates
- d) Other Certificates

DECLARATION

I hereby declare that all statements made in this application are true, complete and correct to the best of my knowledge and belief. In the events of any information being found false or incorrect at any stage or not satisfying the eligibility criteria according to the requirement, my application may be summarily rejected. I am physically sound to discharge the duty to be assigned & undertake to abide by all the terms & conditions of the recruitment as decided by the competent authority.

Place:

Date:

Signature of the Candidate