

BIO – DATA – PROFORMA

Application for the post of Nursing Superintendent at All India Institute of Medical Sciences, Jodhpur				
1.	Name and address in BLOCK letters		Please attached Recent Passport Size Photo
2.	Date of Birth (in Christian era)			
3.	Date of retirement under Central/State Government Rules			
4.	Educational Qualification	i)		
		ii)		
		iii)		
		iv)		
5.	Whether educational and other qualifications required for the post are satisfied.			
6.	If any qualification has been treated as equivalent to the one prescribed in the rules, state the authority for the same.			
7.	Qualifications/ Experience required		Qualifications/ Experience possessed by the Officer	
	<u>Essential Eligibility Criteria:-</u> Officers of the Central / State Governments or Statutory / Autonomous Bodies: (i) Holding analogous posts, OR (ii) Deputy/Assistant Nursing Superintendent with 5 years regular service in the Grade pay of Rs. 5400/-			
8.	Please state clearly whether in the light of entries made by you above, you meet the requirements of the post. (Yes/No)			
9. Details of employment in chronological order (Enclose a separate sheet, duly authenticated by your signature if the space below is insufficient).				
Office/Institution /Organization	Post held on regular basis		*Pay-band and Grade pay (Scale of Pay post held on regular basis)	Nature of duties (in Details) highlighting experience required for the post applier for
	From	To		
10.	Nature of present employment (i.e.ad-hoc or temporary or quasi-permanent or permanent)			

11.	In case the present employment is held on deputation/contract basis, Please state :			
	(a) The date of appointment	(b) Period of appointment deputation/contract	(c) Name of the parent office/ organization to which you belong	(d) Name of the post and Pay of the Post held in substantive capacity in the parent organisation
12.	Please state whether working under: (A) Central Government (B) State Government (C) Autonomous Organization (D) Government undertaking (E) University (F) Other			
13.	Are you in revised scale of pay? If yes, give the date from which the revision took place and also indicate the pre-revised scale.			
14.	Additional information, if any, which you would like to mention in support of your suitability for the post (Enclose separate sheets, duly authenticated, if the space is insufficient)			
15.	Whether belongs to SC/ST (if yes, please specify)			
16.	Contact Nos.	1) Office		
		2) Residence		
		3) Mobile		
		4) E-mail address		
<i>Signature of the Candidate</i> Candidate's Address: _____				
Date: _____				
<u>Certification by the Employer / Cadre Controlling Authority</u>				
I. It is certified that there is no vigilance or disciplinary case pending/contemplated against Shri/Smt. _____ II. His/ Her integrity is certified. III. His/ Her CR Dossier in original is enclosed/photocopies of the ACRs for the last 5 years duly attested by an officer of the rank of Under Secretary of the Govt. of India or above are enclosed. IV. No major/minor penalty has been imposed on him/her during the last 10 years.				
Countersigned:				

[Employer/Cadre Controlling Authority with Seal]				
Date: _____				