

**APPLICATION FORM FOR APPOINTMENT AS MEDICAL OFFICER GRADE I/II ON AD-HOC BASIS
IN BORDER ROADS ORGANISATIONS**

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1. (a) Name (as recorded in Matriculation of : _____
Sh/Smt/Kum equivalent certificate)
(In block Capital in English)

(b) Present postal address : _____
(In Block Capitals in English) : _____
With Mobile No & Tele No : _____
: _____
PIN Code : _____

Mob									
Tele									

(c) Permanent postal address : _____
With Mobile No & Tele No : _____
: _____
: _____

Mob									
Tele									

(d) Father's Name/husband's name : _____
(In Block Capital in English)

(e) Candidate's Nationality : _____

2. Date of birth (In Christian era as recorded : _____
In Matriculation or equivalent
Certificate

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3. **Qualification (Essential)**

Do you possess the MBBS degree
Recognized by MCI and have the valid
Authority to practice ? if yess,
Please state :-

(a) Year of passing MBBS examination : _____
With percentage of marks

(b) Year of completion of Internship : _____

(c) Year of completion of House Job : _____

Desirables

- (a) Details of post-graduate Degree, if any, alongwith the subject of specialty and percentage of marks : _____
: _____
- (b) Details of post-graduate Diploma, if any. Alongwith the subject of specialty and percentage of marks : _____
: _____

Details of previous employment

Office/Institution/ Organisation	Post held	From	To	Scale of Pay and the basis pay	Nature of duties

- 5. Do you belong to
 Schedule cast : 1
 Schedule Tribe : 2
 Other Backward classes (OBCs) : 3
 Other (General category) : 4
- 6. (a) Are you married : Yes/No
 (b) If, yes,, please state whether you have more than one spouse living
- 7. (a) Have you ever been convicted for a Criminal offences involving moral turpitude in any Court of Law ? If, yes, please give details : Yes/No _____
: _____
- 8. (a) Have you ever been dismissed/ disqualified for service under Central/ State Govt./Autonomous Institutions/ PSUs ? :Yes/No
 (b) If so, please state reasons therefore : _____

IMPORTANT : BEFORE SIGNING, PLEASE CHECK YOUR ENTRIES

- 9. Certified that entries made above in columns 1 to 8 of this application are true.

(Signature of candidate)

(Please enclose the attested copies of the certificate in support of your age, educational Qualifications, experience, caste status etc..)

DECLARATIONS TO BE SIGNED BY THE CANDIDATE

I also hereby declare that all statements made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect or intelligibility being detected before or after submission of the application my candidature will stand automatically disqualified.

I further declare that I fulfil all the conditions of eligibility regarding Age Limit, Educational Qualification, etc.. Prescribed for recruitment on Adhoc basis in Border Roads Organisation.

Place : _____

(Signature of candidate)

Date : _____

(Name as signed (In block capitals in English))