



**अखिल भारतीय आयुर्विज्ञान संस्थान, पटना**  
**All India Institute of Medical Sciences, Patna**  
**Phulwarisharif, Patna- 801507**



Advt. No. : 17667-Medical Officer Unani/2023 Dated: 26.10.2023

**Application for the post of Medical Officer (Unani) under UR-PwBD Category at AIIMS, Patna.**

1.	Name (in BLOCK Letters)				<b>Affix here recent Passport size Photograph</b>
2.	Father's Name				
3.	Mother's Name				
4.	Date of Birth (in Christian era)	DD	MM	YYYY	
5.	Age as on last date of filling of application form	Years	Months	Days	
6.	Have you applied under PwBD Category against Advt. No. 17667-Medical Officer Unani/2019 Dated 29.06.2019				Yes/No
7.	Gender				
8.	Marital Status				
9.	Mobile Number				
10.	E-mail Address				
11.	Nationality				
12.	Category				
13.	Type of Disability	OA / OL	Percentage of Disability		
14.	Disability Certificate Number				
<b>ADDITIONAL DETAILS</b>					
15.	Are you a Kashmiri Migrant?				Yes/No
16.	Are you an employee of Central/State Government/Autonomous Body/PSU?				Yes/No
<b>IDENTIFICATION DETAILS</b>					
17.	Mark of visible Identification				
18.	Do you have PAN Card?	Yes/No	If yes, please provide PAN Number		
19.	Do you have Adhaar Card?	Yes/No	If yes, please provide Adhaar Number		
20.	Do you have Driving License?	Yes/No	If yes, please provide DL Number		
21.	Do you have Passport?	Yes/No	If yes, please provide Passport Number		
<b>22. CORRESPONDENCE ADDRESS (Please mention complete address with PIN Code)</b>					
<b>23. PERMANENT ADDRESS (Please mention complete address with PIN Code)</b>					



24. ESSENTIAL QUALIFICATION DETAILS							
Course Name	Name of Board	School/Institute Name	Marks Obtained	Maximum Marks	Percentage of Marks/CG PA	Year of Completion	Division
25. ANY OTHER HIGHER QUALIFICATION DETAILS							
Course Name	Name of Board	School/Institute Name	Marks Obtained	Maximum Marks	Percentage of Marks/CG PA	Year of Completion	Division



26. EXPERIENCE DETAILS					
Name of Organisation	Post held	Start date of service	End Date of service	Pay Scale/CTC of post held	Length of Service rendered as work experience

27. DECLARATION		
I hereby declare that all the statements made in this application form 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 any ineligibility being detected at any time during or after the selection process, my candidature may be cancelled forthwith without any notice and action can be taken against me by AIIMS Patna.		
28.	Are you holding minimum essential educational qualification for the post?	Yes/No
29.	Are you having minimum experience required for the post?	Yes/No

**NOTE:** All relevant mandatory documents in support of candidature are to be attached and should be self-attested.

**Date:**

**(Signature of the Candidate)**

**Name:**

**Address:** \_\_\_\_\_

\_\_\_\_\_  
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Left Thumb impression of the candidate.	
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### CHECKLIST

SL. NO.	PARTICULARS	YES/NO
1	Duly filled Application form	
2	10 <sup>th</sup> Mark sheet and Certificate	
3	12 <sup>th</sup> Mark sheet and Certificate	
4	Essential Qualification Mark sheet and Certificate	
5	Other higher qualification Mark sheet and Certificate (if any)	
6	Experience Certificate	
7	Disability Certificate	
8	Any other relevant document in support of candidature (if any)	

The duly filled application form in prescribed format along with self-attested copies of aforesaid documents should reach at **“Senior Administrative Officer, Administrative Building, Phulwari Sharif, AIIMS Patna, PIN- 801507”** through Speed/Registered Post within 21 days from the date of publication of Addendum to the official website of AIIMS Patna. Application received after expiry of the given time period shall not be considered valid and summarily rejected. No further communication shall be entertained in this regard.

