

**Office of the Principal, Autonomous State Medical College
Piprola, Shahjahanpur, Uttar Pradesh, Pin-242001**

Email: principalsmcsah@gmail.com

Website: www.smcsah.in

Application Format

Advertisement Number and Date:

Post Applied.....Department.....

Self Attested
Photo

Note:-All information must be completed by the applicant.

1. Name of Applicant.....
2. Gender (Male/Female).....
3. Father/Husband's Name (Including Surname).....
4. Present Address of Residence (including PIN code)
-
- Name of the City.....Phone No.....
- Mobile Number Email. ID.....
5. Permanent Address
-
- Name of the City Phone No.
- Mobile Number.....Email. ID.....
6. Aadhar Card Number.....
7. PAN Card Number
8. Date of Birth (enclose the mark sheet of high school examination).....
9. Age of applicant as on 01-07-2024.....Day.....Month..... Year.
10. Applicant's Marital Status-Married/Unmarried.....
10. Date of Marriage.....
11. Category: Unreserved/Scheduled Caste/Scheduled Tribes/Other Backward Classes / EWS /
Disabled
- (Attach photocopy of certificate issued by competent authority for reserved category)
12. Registration Number and Name of the Medical Council and Date.....
- a- MBBS-
- b- MD/MS-
- c- MCH/DM-
13. Educational Qualification: (Enclose attested photocopies of certificates and marks sheets)

No.	Name of the Examination	Institution/Board/ University	Year	Subject	Marks Obtained/Max Marks	MBBS Total Marks/ Percentage	Number of attempt (s)
1	MBBS						
2	MD/MS						
3	MD/MCH						

14. Educational Experience:-

No.	Designation	From	To	Duration	Institution Name	Recognized by MCI
1	Professor					
2	Associate Professor					
3	Assistant Professor					
4	S.R./Tutor/Demonstrator					

(Attach experience certificate)

15. Research Publications:-

No.	Designation	Number	Research Publications as per Vancouver reference style
1	Professor		
2	Associate Professor		
3	Assistant Professor		
4	S.R./Tutor/Demonstrator		

(Attach Photo Copy, only 1st Page & Maximum 10 Pages)

16. Application Fee Demand Draft No.....Dated.....Bank Name
 for Rs. 1000/- in favor of Principal, Autonomous State Medical College,
 Shahjahanpur. Payable at Shahjahanpur-242001 is attached in original.

17. List of attached certificates

//Announcement//

- I certify that the above information given by me is complete and true. In the event of information being false my application form/appointment letter can be cancelled.
- I certify that I have not been found guilty by any court of any offense of moral decimation nor is there any such case against me in any jurisdiction.

Place.....

Date.....

Signature of the Applicant

.....

Full Name

CHECKLIST

S. No.	Particulars	Yes / No
1	Two Passport size recent color Photographs	
2	Matriculation/High School certificate from a recognized Board of Education/University in support of your Date of Birth as claimed by you in your application	
3	Mark Sheets of all the passing Examinations.	
4	Attempt certificate for MBBS Course by Competent authority.	
5	Degree Certificate of MBBS or equivalent as per NMC norms.	
6	Registration Certificate of MBBS from NMC/State Medical Council	
7	Attempt Certificate for MD/MS or equivalent Course (as per NMC) by Competent Authority.	
8	Degree Certificate of MD/MS or equivalent as per NMC norms.	
9	Registration Certificate of MD/MS or equivalent from NMC/State Medical Council	
10	Documentary evidence(s) supporting that the Degree concerned is from Institute(s) recognized by NMC.	
11	Cast Certificate if belonging to SC/ST/OBC category etc. from the competent authority in support of the category claim along with Domicile Certificate from the State of Uttar Pradesh not below the rank of DM. in case of SC/ST/OBC category etc. (and in case of female candidates on behalf of father only). The cast Certificate issued within six months should be submitted.	
12	Post MS/MD teaching experience as Senior Resident/Faculty, mentioning the period of experience (Including Joining and Relieving dates) from the competent authority/Employer.	
13	Original Research articles- documentary evidence of Indexing as per NMC norms.	
14	No Objection Certificate from the present employer for this interview.	
15	Aadhar Card	
16	PAN Card	
17	Bank DD	