



All India Institute of Medical Sciences, Bhubaneswar

(A Statutory Body under the aegis of Ministry of Health and Family Welfare, Govt. of India)

Sijua, Dumuduma - Post, Bhubaneswar (Odisha) -751019

APPLICATION PROFORMA FOR VETERINARY OFFICER

1.	Name (in Block letters)					Affix Passport Size Photograph
2.	Father's Name					
3.	Mother's Name					
4.	Date of Birth * (In Christian era)					
(* Please attached attested copy of relevant certificate)						
5.	Permanent Address					
6.	Address for Correspondence					
7.	Mobile Number				8. Citizenship :	
9.	E-mail ID					10. Gender:
11	Category (Please √)	UR	SC	ST	OBC	OPH

12. UNDERGRADUATE and POSTGRADUATE CAREER (*Attach self-attested copies of certificate/ degree in support of qualifications)

Examination Passed	Year of Passing	University/ Institution	Overall marks obtained in all professionals	Overall maximum marks in all professionals	The overall percentage of marks in all professionals

13. Detail of previous experience, if any

Post held (indicate temporary/permanent)	Period		Total Period			Payscale	Employer's Address
	From	To	Years	Months	Days		

14. Whether the degree is recognized by National/State Accrediting Agencies: Yes/No
Attach attested copies of relevant documents.

15. Do you have any training in CPCSEA guidelines in laboratory animal facilities? If yes, please provide relevant documents.

DECLARATION BY THE CANDIDATE

I hereby declare that the above information is true, complete and correct to the best of my knowledge and belief. I have not suppressed any material, fact or factual information. I have never been debarred from appearing at any examination nor have I ever been arrested, prosecuted or convicted by a criminal court or involved in any other case registered by the police.

I understand that my candidature is liable to be rejected in the event of any misstatement/discrepancy in the particulars being detected and after my appointment in such an event, my services are liable to be terminated without any notice to me or reason thereof. I undertake not to make any claim or compensation if at any stage of my selection, my ineligibility for candidature is detected and my candidature is cancelled as a result thereof.

Date:

Place:

Signature of Candidate

Enclosures:-

S. No	Copy of the Certificate	Please tick
1.	Date of Birth and Class X and XII Certificate	
2.	Undergraduate Certificate and Mark Sheets	
3.	Postgraduate Certificate and Mark Sheets	
4.	Experience Certificates	
5.	Address proof	
6.	Training in CPCSEA guidelines in laboratory animal facilities	
7.	Copies of any other relevant documents	