

**BANGALORE MEDICAL COLLEGE & RESEARCH INSTITUTE,
BENGALURU.**

APPLICATION FORM FOR THE POST OF _____
(ON CONTRACTUAL BASIS)
FOR STATE LEVEL VRDL, DEPARTMENT OF MICROBIOLOGY
Notification No: BMCRI/Est(2)A/26/15-16, Dated:04.09.2015

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Date of Interview :14.09.2015
Registration From 10 AM & Interview 2 PM Onwards

1	Name of the candidate (in capital letters)																			
2	Qualifications prescribed for the post																			
3	Sex	Male	Female																	
4	Category: (SC/ST, Cat-I/IA/IIA/IB/IIB/IIIA/IIIB/GM/H-K specify with certificate)																			
5	Nationality																			
6	Postal address for correspondence Mobile No <table border="1" style="width:100%; height:20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> E-mail I.D													Pin code : <table border="1" style="width:100%; height:20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>						
7	Name of Father/Mother/Husband/wife																			
8	Date of Birth as recorded in the S.S.L.C. certificate																			
9	Indicate Kannada Language in SSLC or equivalent examination 1 st , 2 nd or 3 rd Language.		<table border="1" style="width:100%; text-align:center;"> <tr> <td>1st Language Kannada</td> <td>2nd Language Kannada</td> <td>3rd Language Kannada</td> </tr> <tr> <td>Marks scored</td> <td colspan="2">Max. Marks</td> </tr> <tr> <td><table border="1" style="width:100%; height:20px;"></table></td> <td colspan="2"><table border="1" style="width:100%; height:20px;"></table></td> </tr> </table>	1 st Language Kannada	2 nd Language Kannada	3 rd Language Kannada	Marks scored	Max. Marks		<table border="1" style="width:100%; height:20px;"></table>	<table border="1" style="width:100%; height:20px;"></table>									
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Marks scored	Max. Marks																			
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10	Details of the Qualifications :																			
Sl. No.	Qualification	Total Marks Obtained	Percentage	Name of the College & University & year of passing																

11 Experience of previous appointments.				
Designation	Period (DD/MM/YYYY)		Total no. of years	Name of the Institute / College & University
	From	To		
12	Higher qualification if any & year of passing, from the recognized Institute / University / College.			
13	Present employment if any			
14	Other information			

NOTE:- Candidate should produce all original Marks cards & other related original documents at the time of walk in interview.

:-DECLARATION:-

I declare that the above furnished information is true and correct to the best of my knowledge and belief. If any of the information furnished above is found to be false or incorrect, I shall be liable to civil / criminal action by instruction or Government of Karnataka as per law.

Place:

Date:

Signature of the Candidate