

URBAN HEALTH SOCIETY

AHMEDABAD MUNICIPAL CORPORATION

Second Floor, "Aarogya Bhavan", Old TB Hospital Compaund, Opp. Gita
Mandir S.T. Bus Stand, Gita Mandir Road, Ahmedabad. – 380022.

Email ID: hr.hodnuhm@gmail.com Tel: 079-25392185



Affix your latest Passport size Photograph duly self attested

APPLICATION FORM FOR THE POST OF MEDICAL SPECIALIST FORM NEED TO BE FILLED IN CAPITAL LETTER ONLY

FOR OFFICE US Application No:		ost Applied Fo	or:		
Name in full Father's/ Husba					· · · · · · · · · · · · · · · · · · ·
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Permanent addres	ss <u>:</u>	•	Tel No:		
	of qualifications		th: mencing from S.S.C sfully completed Completed		
Name of Exam /Degree	School/ College / University	Year of Passing	Class/Division	Rank / %	Trial

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Computer Kn	owledge:			- m - m - m - m - m - m - m - m - m - m		
Course Name	University/Cer	nter C	lass/Division	Year of Passing	Rank /	
	ı join if offered previous appoir			rience:		
Details of the Name of of the stitution &				To DD/MM/YY	Total Experience in Years &	
Details of the Name of institution &	previous appoir	ntment and	working exper	То	Experience	
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Details of the Name of nstitution &	previous appoir	ntment and	working exper	То	Experience in Years &	
Name of institution & Department	previous appoir	ntment and	working exper	То	Experience in Years & months	

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Religion	Nationality
Marital Status	
Disability of permanent nature or chronic illness, if Any	

9. Please name two references who are not your relative and who can certify about your Work and conduct:

(1).	(2).
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10. Any other relevant Information:

I solemnly declare that the particulars furnished in this application are true and correct. I clearly understand that any misstatement of fact contained herein or willful concealment of any material fact will render me liable to appropriate action as may be decided by UHS-AMC. I accept all the terms & conditions mention in the advertisement issued by The Urban Health Society, Ahmedabad.

Place:

Date:

Signature:

- N.B. (1) Candidates should furnish with this application true copies of all the certificate, testimonials of education qualification from S.S.C. Onwards and experience & computer etc., duly certified by Gazetted Officers.
 - (2) Application with incomplete information will not be accepted.
 - (3) The application should be in the candidate's own handwriting.

ENCLOSURES

Sr. No.	Documents	Page no.
1	Proof of Birth (Birth certificate or school leavening certificate)	
3	S.S.C.& H.S.C. Mark Sheet (including mark sheet of failure)	
4	Degree Mark Sheet (including mark sheet of failure)	
5	Mark sheet & Degree Certificate of any additional Qualification (including mark sheet of failure)	·
6	Degree Certificate	
7	PG Degree Certificate – if available	
8	Experience Certificate	
9	Computer Certificate	
10	Gujarat council registration Certificate	
11	Any other documents (mention)	