

12. Council Name & Registration Number	
13. Blood Group	
14. Nationality	
15. PAN Number	
16. Additional Qualifications if any	
<ul style="list-style-type: none"> • Computer Skills 	
17. Previous experience, if any (specify your designation, name and address of employer & duration of work there)	
18. Present employment if any (specify your designation, name and address of employer & duration of work there)	
19. Extracurricular activities (Religious, Social and Sports & Games) (Attach separate sheet if needed)	

Enclosures

1. Self-Attested copy of Mark Sheet and MBBS Certificate.
2. Self -Attested copy of TCMC Registration
3. Self -Attested copy of Birth Certificate.
4. Conduct/Character certificate from the Head of the Institution where the candidate last studied.
5. Self –Attested copy of experience certificate, if applicable.
6. Recent passport size photographs

Declaration

I.....Son/Daughter ofhereby assure that the particulars given in this form are true to the best of my knowledge. I promise to abide by the rules & regulations of Rajagiri Hospital if admitted for the course.

Signature of student

Place:

Date :

****Incomplete applications are liable to be rejected.***