

12. Council Name & Registration Number

13. Blood Group

14. Nationality

15. PAN Number

16. Additional Qualifications if any

- 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.
7. Payment Screenshot of Rs.200 made for the registration.

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.***

Kindly attach and scan the whole application and send it to the email academic.coord@rajagirihospital.com.