

Government Medical College, New Civil Hospital, Surat – 395009
ICMR project “Capacity Building and strengthening of hospital infection control to detect and Prevent Antimicrobial resistance in India”,
Department of Microbiology

BIO-DATA

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1. Name of the post, applied for : _____
2. Name of the Project : _____
3. Name in full (In BLOCK LETTERS):

4. Mother’s Name : _____
5. Father’s Name : _____
6. Husband’s Name : _____
7. Guardian Name & Phone No : _____
8. Address for Correspondence : _____

9. Permanent Address : _____

10. Date of Birth : _____ Age : _____
11. Marital Status : Married/ Unmarried
12. Educational Qualification :

Sr. No	Examination passed	Grade	Year of Passing	Board/ University	Specialisation

13. Work Experiences:

Sr. No	Period From	Period To	Total Period	Post held & Scale of Pay	Name of the employer	Reason for Leaving

14. If selected ,what period would you require joining the post: _____

15. If selected the candidate will have to provide fitness certificate from an authorised medical practitioner.

I hereby declare that the particulars furnished in this form by me are true to the best of my knowledge and belief.

Date: _____

Place: _____

Signature of Candidate