

PATNA DENTAL COLLEGE & HOSPITAL, BANKIPUR, PATNA

APPLICATION FORM FOR APPOINTMENT OF CONTRACTUAL TEACHING POST

Post and Name of Department applied for Advertisement No-**PR-8268 /2017-18**

Name (in capitals).....Age.....Sex.....

Date of Birth [] , [] , [] Date of Retirement [] , [] , []

Reservation Category : () General () BC () EBC () SC () ST ()

Father's / Husband's Name :

Correspondence Address :

Permanent Address :

Affix passport size recent Photograph and self-attest in by signing across it running onto the form.

Do not sign of face.

For Office Use

Application No.....

Contact No. : Email ID

Current Post, Place, Employer, State

Whether NOC obtained from current employer- Yes/No

Teaching Experience – As Tutor As Lecturer.....

(In Months) As Reader..... As Professor.....

Total Govt. Teaching Experience Claimed..... Years as(Post)

Educational Qualification (as Per DCL) :

Qualification (Degree) With specialty	University	Year of Passing	Marks Obtained/Full Marks	Total Failures (in words)	% of marks in BDS	% of Marks in specialty subject in which applied
BDS						
MDS (.....)						

BSDC Registration number Year..... Valid Till.....

Declaration by Candidate : I hereby declare that the information furnished in this application form is true , if, at any stage, it is found to be incorrect, I will be liable for administrative action including termination of my contract and initiation of legal proceedings.

Date :/...../.....

Full Signature of Candidate.....

FOR OFFICE USE ONLY

Remarks Board Members on (1) Requisite Educational Qualification for the Post : Yes/ No.

(2) Requisite Teaching Experience: Yes/ No. (3) Other Qualification/Eligibility for the post : Yes/ No.

Evaluation Marks- For BDS Degree.....%.....Marks, For Specialty Sub. In BDS.....%.....Marks

Negative Marks for Failure.....(-)ve marks, MDS Marks-**10** Govt. Teaching Exp.....Years.....Marks (Max.25)

TOTAL MARKS.....(In Words also)

Signature of Board Members:

1.....2.....3.....4.....