Institute of Liver & Biliary Sciences

D-1, Vasant Kuni, Delhi, India

An Autonomous Institute under the Govt. of NCT of Delhi
(Deemed University)

Application for Faculty Position

Photograph

Post applied for _____

1. Name in block letters : Dr./Prof. _____ _____ _____
   First Middle Last
2. Marital Status : Married / Unmarried / Widow / Divorcee
3. (a) Permanent address : _____
   _____
   (City)_____(State)_____(Pin)_____
   (b) Postal address : _____
   (for correspondence) _____
   (City)_____(State)_____(Pin)_____
4. Telephone and mobile number : _____
   _____
5. E-mail address : _____
6. Date of birth : _____
   (Please annex documentary evidence)
7. Are you
   (a) A citizen of India by birth and or by domicile? ☐ Yes ☐ No
   (b) Peson of Indian origin : ☐ Yes ☐ No
   (c) Holding dual citizenship : ☐ Yes ☐ No
8. Do you belong to any of the following categories
   (Please annex documentary evidence):
   (i) SC / ST / OBC : _____
   (ii) PWD (having 40% or more disability) suffering from _____
9. Father's/ Husband's name : _____ _____ _____
   First Middle Last

10. Qualifications:

Name of Examination	Month & Year of Passing the examination	Specialty	Institution	University	(a) Class/Division (b) Distinction or prize in one or more subject
M.B.,B.S. MD / MS DM / M.Ch Ph.D. Post-doctoral certificate course Any other examination					

11. **Experience:** Teaching and Professional (use additional sheet if needed)

S. No.	From		To		Position	Department	Institution / University
	Month	Year	Month	Year			
1. 2. 3. 4. 5. 6.							

12. Present Employment

S. No.	Position	Joining Date	Department	Institution	Salary drawn

Candidates working in Central/ State-Govt. Organization, Autonomous Bodies, Public Sector Undertaking, should apply through proper channel.

13. **Publications** (Peer reviewed and indexed journals; Abstract not to be included, can attach details as an annexure, as per standard citation).

Published		Accepted
National	International	

14. **Additional information** (nomination, awards, recognitions, recommendations, etc.) :

_____

_____

15. **References** (Name, designation, address and telephone/mobile number):

1._____ 2. _____

_____ _____

_____ _____

_____ _____

16. Enclosures:

1. Demand Draft Number_____Date_____Amount_____Bank_____
or receipt of electronic transfer to Account No. 50100143852078, RTGS/NEFT IFSC - HDFC0000273, Bank Name - HDFC bank, Branch name - Site No. 2, OCF Pocket, Sector - C, Vasant Kunj, New Delhi - 110070. 2.

3. _____

Declaration

I hereby declare that all statements made in this application are true and complete to the best of my knowledge and belief. In the event of any information being found false or incorrect or ineligibility being detected before or after the test, interview, and joining, my candidature will stand cancelled and all my claims of the recruitment will stand forfeited.

Date: SIGNATURE OF THE APPLICANT