

Annexure-A

All India Institute of Medical Sciences, Nagpur
BRIEF OF THE CANDIDATE

Name:				Post Applied for:		Date of Birth				
Category:				Department:		Age as of Closing date (07.11.2024)		Years	Months	Days
Direct Recruitment/ Deputation/ Contractual Basis (Retired Faculty)										
Qualifications	Year of Passing	No. of attempts	Institution	Experience		Duration		Organization/Institution		
Degree				Level/Designation		From	To			
MBBS/M.Sc										
M.D./M.S/PhD										
D.M./M.Ch										
D.N.B.										
Paper Published	PubMed Indexed	Non-PubMed Indexed	Accepted publications	Presented at Conferences		Awards/Recognitions/Patents				
National										
International										
Total										
Funded Research Projects	Intramural									
	Extramural									
Chapter in Books:						Any other information:				
						Notice period required for joining:				
Date						Signature of the Candidate				

Paste your recent passport size photograph here