

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 (16.06.2025)	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