

**CENTRAL INSTITUTE FOR RESEARCH ON GOATS
MAKHDOOM P.O. FARAH-281122 MATHURA (U.P.)
Phone 0565-2763380(Director), 22763327 (Sr. Admn. Officer)
Fax No. 0565-2763246**

No.F 1-6(65)/2012/E.I

ated :- 06.06.2014

RECRUITEMENT FOR MEDICAL OFFICER

Service of Medical Officer having Qualification M.B.B.S/BAMS/BHMS are required purely on deputation basis on pay in pay band- 3(15600-39100 with Grade pay of Rs. 5400) per month at CIRG, Makhdoom. Desirous candidates may submit their application on or before 14 July 2014 positively with Complete Bio-data, original certificates of qualifications, date of birth experience, passport size photograph, and registration certificate issued by Competent Authority/Council. A certificate may also be submitted for NOC and status of disciplinary/Vigilance case from his parent department.

Incomplete applications received after due date and not forwarded through proper channel or without CR Dossiers and certificates as desired above will not be entertained.

Form of application is enclosed.

**(R.K.SHARMA)
SR. ADMINISTRITIVE OFFICER**

FORMAT OF APPLICATION FORM

Affix
Self attested
Photo

1. Advertisement No. _____
2. Post applied for _____
3. Name of applicant (In Block letter)_____
4. Father's name :- _____
5. Date of Birth :- _____
6. Postal Address :- _____

7. Permanent Address :- _____

8. Nationality _____
9. Category-(SC/OBC/Ex-Service) :- _____
10. Qualifications (Starting from Secondary in chronological order)

| S.No. | Name of Exam | Year of passing | Univ./Board | Div./Class Grade | Subject | % of Marks |
|-------|--------------|-----------------|-------------|------------------|---------|------------|
| | | | | | | |

11. Professional/Technical Qualification :- _____
12. Experience:-

| S.No. | Name of employer with phone No., email, if any. | Period From to | Designation | Pay Scale/ Pay | Nature of duties | NOC given by Employer (attached pl). |
|-------|---|----------------|-------------|----------------|------------------|--------------------------------------|
| | | | | | | |

I solemnly declare that the statement made by me in this form is correct to the best of my knowledge and belief.

Dated:

Signature of Candidate

Place:

List of enclosures.