District Health Society- NTEP

National Tuberculosis Elimination Programme - Chengalpattu District

APPLICATION FORM

(On Contractual Basis)

1. Applying for the Post of	:		
2. Name of the Candidate (In Block Letters)	:		Photo
3. Father/ Husband Name	:		
4. Date of birth / Age in completed years	:	<u>////</u> Yrs.	
5. Sex	:	Male / Female/ Transgender	
6. Religion	:		
7. Community	:		
8. Sub Caste	:		
9. Aadhaar Number	:		
10. Registration No. in TNMC, Nursing Council etc.,			
11. Permanent Address	:		
Present Address	:		
12. Mobile Number			
	•		
13. E-mail ID	:		

14. Educational Oualification

Sl. No	Exam passed	Year of passing	Board /University	% of Marks

15. Work Experience

Sl No	Name of the Employer (Name of the	Peri (Date/mor		Post held
	office/Institution)	From	То	

16. Two-Wheeler Driving License : Yes/ No

17. Self-Attested Documents Xerox copies of the following to be attached

A 11 C 1		XZ / NT
Aadhaar Card.	:	Yes/ No
Community Certificate.	:	Yes/ No
10 th , 12 th Mark sheet	:	Yes/ No
Degree/ ANM/ MPHW certificate		Yes/ No
Post graduate certificate	:	Yes/ No
Driving License (if applicable)	:	Yes/ No
TNMC/TN Nursing Counsel Registration certificate:		Yes/ No
(if applicable)		
Experience Certificate	:	Yes/ No
Computer course certificate	:	Yes/ No
Recently taken passport size photo.	:	Yes/ No
Conduct Certificate	:	Yes/No
Self-addressed office envelope stamps affixed value :		Yes/No
of Rs.10/- to be enclosed		
	10 th , 12 th Mark sheet Degree/ ANM/ MPHW certificate Post graduate certificate Driving License (if applicable) TNMC/TN Nursing Counsel Registration certifica (if applicable) Experience Certificate Computer course certificate Recently taken passport size photo. Conduct Certificate Self-addressed office envelope stamps affixed value	Community Certificate.:10th, 12th Mark sheet:Degree/ ANM/ MPHW certificate:Post graduate certificate:Driving License (if applicable):TNMC/TN Nursing Counsel Registration certificate:(if applicable)Experience Certificate:Computer course certificate:Recently taken passport size photo.:Conduct Certificate:Self-addressed office envelope stamps affixed value :

DECLARATION

I hereby declare that the information furnished above is true, complete and correctto the best of my knowledge and belief. I understand that in the event of any of the information provided by me are found false or incorrect at any stage, my candidature / appointment shall be liable for cancellation / termination without notice or any compensation in lieu thereof.

Signature of the Candidate

Place:

Date: