



नेशनल फर्टिलाइजर्स लिमिटेड,
नंगल इकाई, नया नंगल (पंजाब)-140 126
(भारत सरकार का उपक्रम)

Annexure-A

APPLICATION FOR ENGAGEMENT OF DOCTOR ON CONTRACTUAL BASIS AT NFL HOSPITAL, NAYA NANGAL, (PB.)

Advertisement . No: NFL/NGL/HR/DOC-2025

Dated :

(TO BE FILLED IN CAPITAL LETTERS ONLY)

(1)	POST APPLIED FOR		MEDICAL OFFICER			<i>Paste your recent passport size coloured photograph duly signed across</i>
(2)	NAME IN FULL					
(3)	FATHER'S NAME					
(4)	DATE OF BIRTH :	/...../.....			
(5)	GENDER :					
(6)	MARITAL STATUS					
(7)	NATIONALITY					
(8)	MOBILE NO. :					
(9)	EMAIL ID					
(10)	CORRESPONDENCE ADDRESS:		PERMANENT ADDRESS:			
	PIN		PIN			
	STATE		STATE			
EDUCATIONAL QUALIFICATIONS:						
(11)	QUALIFICATION	SPECIALIZATION	NAME OF THE BOARD/COUNCIL/UNIVERSITY		YEAR OF PASSING	
(1)	MATRIC					
(2)	+2 SCIENCE					
(3)	MBBS					
(4)	AFIH CERTIFICAION					
(12)	EXPERIENCE:					
	NAME OF THE EMPLOYER	FROM	TO	TOTAL PERIOD	REASON FOR LEAVING	

(13) Medical Council Registration No. : Date :

State : Valid upto :

(14) Whether presently employed with any PSUs / Autonomous Body / Govt. Department? YES / NO

If Yes, Name & Address of the Present Employer

DECLARATION:

I do hereby declare that all the above information given by me is correct. I understand that false statement and/or suppression of any material fact in this application will be considered sufficient cause for rejection of my application / candidature without notice. I agree to abide by the terms and conditions as mentioned in the Advt _____ dated

Date:

Full Signature of the Candidate

NOTE: Applicants are required to submit all relevant certificates / documents in original along with one set of self-attested copies of the same in support of the information given above at the time of walk-in Interview.