


MANGALORE UNIVERSITY
 Mangalagangothri – 574 199, D.K. District, Karnataka

**APPLICATION FOR THE POST OF MEDICAL OFFICER/LADY MEDICAL
 OFFICER ON TEMPORARY BASIS**
 (To be submitted along with all enclosures)

AFFIX RECENT PASSPORT SIZE PHOTOGRAPH

1. Name of the Post :-----
 (in Block letters)

2. Personal Details :

Name : (in Block letters)				
Nationality			Mother tongue :	
Date of Birth		Age as on the last date of application		Sex
DD	M M	Y Y		
Name of Mother				
Name of Father				
Marital Status				
Name of Spouse				

3. Category :

Category Claimed	GM	S C	ST	CAT-I	II-A	II-B	III-A	III-B
Caste								
Sub-caste								
Horizontal Reservation	Woman		Rural		Person with Disabilities		Ex. Servicemen	

Note : Enclose Certificate issued by the Competent Authority. Application without required certificate will be considered under GM Category.

5. Academic Qualifications (Starting from the highest qualification) :

Degree	Name of the University / Board	Year of Passing	% of marks	Division/ Class/ Grade

6. Details of Experience:

Sl. No.	Name of the Institution	From	To

7. Other Relevant Information if any :

D E C L A R A T I O N

I hereby declare that all information given in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false, incomplete or incorrect, my candidature is liable to be cancelled/ my appointment is liable to be terminated. I hereby agree to and abide by the rules and regulations of the University.

Place: _____

Date: _____

Signature of the Candidate

List of Enclosures to this application:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.

10.

Signature of the Candidate