



अखिल भारतीय आयुर्विज्ञान संस्थान, गोरखपुर
All India Institute of Medical Sciences, Gorakhpur

(स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार द्वारा स्थापित एक स्वायत्त निकाय)
(An autonomous organization under the Ministry of Health & Family Welfare, Govt. of India)

कुनराघाट, गोरखपुर, उत्तरप्रदेश-273008
(Kunraghat, Gorakhpur, Uttar Pradesh -273008)

Ref. No. AIIMS/GKP/RECT/FACULTY/2026-27/28

Transaction reference no.	Date	Amount

NOTE:

- To avoid any mis-representation or interpretation of facts, the application must be sent duly 'typed', supported with attested copies of testimonials.
- BRIEF OF CANDIDATE TO BE SUBMITTED AS PER ANNEXURE – A**

Paste here latest
Self attested
photograph

Application for the Post of	
Subject/Department	
Type of Application (Direct Recruitment/ Contractual Basis Retired Faculty)	

I. CANDIDATE DETAILS

1	Full Name (BLOCK LETTERS as given in the Birth certificate)			
2	Father's Name			
3	Mailing Address			
4	Mobile No			
5	Telephone No.			
6	Email address			
7	Aadhar No.			
8	Permanent Address			
9	Date of Birth (DD/MM/YYYY)			
10	Age (as on 08/06/2026)	Years	Months	Days
11	Gender			
12	Marital Status			

13	Whether Person with Disability (PwD) (Yes/No) Attach attested copy of certificate on the proforma	
14	Percentage of disability	
15	Candidate's own category	
16	Category under which applied (UR/SC/ST/OBC/EWS)	
17	Present designation and place of employment	
18	Whether currently employed in Central/State Govt./Autonomous Institutions/Statutory Organizations / PSUs under Central/ State Govt.? (Yes/No)	
19	State of Domicile	
20	Nationality	
21	Religion	

II. EDUCATIONAL QUALIFICATIONS:

(Please attach attested copies of certificates/degrees in support of your qualifications)

(a) Undergraduate Career

Examination Passed	Year of Passing	No. of attempts	Class/Division	University/ Institution	MCI/DCI Registration No. (Valid upto date)
Matric/S.S.C.					
Intermediate/ HSC					
B.Sc					
M.B.B.S.					

(b) Postgraduate Career:

Examination Passed	Year of Passing	No. of attempts	Class/Division	University/ Institution	MCI/DCI Registration (Y/N/NA)
M.D./M.S.					
M.Sc.					
D.M/M.Ch.					
D.N.B.					
Ph.D.					

(C) Indicate No. of years of the DM/Mch course (2yrs/3yrs/5yrs) and name of the Institute with full address.

III. TEACHING/RESEARCH EXPERIENCE:

(Please attach attested copies of experience Certificates)

After obtaining Postgraduate/Super Specialty/Ph.D. Qualification including present employment:

Sl. No.	Post held (indicate Temporary/ Permanent)	Period		Total period			Pay Scale	Employer's Address
		From	To	Yrs.	Mths.	Days		
1.								
2.								
		Total						

IV. ACHIEVEMENTS:

1	Details of Prizes, Medals, Scholarships & National / International Awards etc.	
2	Additional qualification such as Membership of Scientific Society etc.	
3	Research Experience, if any, together with details of published works in indexed journals.	
4	No. of Research projects with extramural funding	
5	No. of Papers presented at National conference	
6	No. of Papers presented at International conference	
7	No. of Papers published (Original articles/Review articles)	
7a	PubMed Indexed	
7b	Non-PubMed Indexed	
8	No. of Papers accepted for publication (Original articles/Review articles)	
9	No. of Chapter in books/books edited	
10	No. of Patents	
11	Are you willing to accept the consolidated pay offered? (for Contractual post)	
12	If selected, what notice period would you require before joining	
13	Have you ever been outside India for Academic Purpose? If so, give details:	

Please provide a list of all your chapters in books/ books edited in chronological order:

Sl. No.	Particulars of Chapter/ Book (in Vancouver format)

14. I have attached attested copies of certificates/degrees in support of age, category, qualification and experience etc. as per list enclosed **Annexure-III**.

Date:

Signature of the candidate

Place:

NOTE:

1. **INCOMPLETE APPLICATION AND THE APPLICATION FORM RECEIVED WITHOUT FEE RECEIPT OF THE REQUIRED AMOUNT WILL NOT BE CONSIDERED.**
2. **SUBMIT ONE SELF ATTESTED PHOTOCOPY OF DOCUMENT REFERRED AT POINT NO. 2 UNDER OF GENERAL CONDITIONS PUBLISHED IN THE ADVERTISEMENT, ALONG WITH THE APPLICATION FORM.**

DECLARATION BY THE CANDIDATE

(Post applied for _____ of _____ Department
at AIIMS, Gorakhpur).

I hereby declare that the above information is true, complete and correct to the best of my knowledge and belief. I have not suppressed any material, fact or factual information. I understand that my candidature is liable to be rejected in the event of any mis-statement/discrepancy in the particulars being detected and after my appointment in such an event, my services are liable to be terminated without any notice to me or reasons thereof I am not aware of any circumstance which might impair my fitness for employment under the Government on regular basis.

Date:

Signature of the candidate

Place:

Annexure- III**LIST OF ENCLOSURES**

Sl. No.	Particulars of enclosures	Attached (Yes/No/Not applicable)
1.	Birth Certificate (or Proof of Date of Birth)	
2.	Matriculation Marksheet & Certificate	
3.	HSC Marksheet & Certificate	
4.	Marksheets of MBBS/M.Sc for all years	
5.	MBBS Degree Certificate	
6.	M.D/M.S./DNB/M.Sc. Degree Certificate	
7.	D.M./M Ch./Ph.D. Degree Certificate	
8.	Experience Certificate(s)	
9.	No Objection Certificate (NOC)	
10.	Community Certificate (SC, ST / OBC (Non-Creamy Layer)	
11.	Income and Asset certificate in case of EWS candidates	
12.	Registration & Additional Registration with Medical Council Certificate	
13.	Disability Certificate	
14.	Fee Receipt	
14.	Any other relevant certificate(s)	

The certificates should be enclosed in the specific order as mentioned above. Candidates already employed in Central/State Govt./Autonomous Institutions / Statutory Organizations/ PSUs under Central/ State Govt. should get the following endorsement signed by their present employer (appointing authority).

NO OBJECTION CERTIFICATE

1. Certified that _____ holds a post of _____ for the period from _____ till date on regular basis in _____ Department. **This institute has no objection to his/her application being considered for the post of _____ in the department of _____ in AIIMS, Gorakhpur. In the event of his / her selection to the post, he / she will be relieved from the duty to take up the post of _____ in AIIMS, Gorakhpur.**
2. Certified that he/she submitted his/her application to the Department /Office/ Institution/Organization on _____ for onward transmission to AIIMS, Gorakhpur -273008.

No. _____ Signature _____

Dated _____ Designation _____
(Seal with Name & Designation)

Office Stamp

DECLARATION TO BE SIGNED BY OBC CANDIDATES ONLY

I _____ son/daughter Shri _____ resident
of Village /Town /City /District _____ State _____ Community _____

(certificate enclosed) hereby declare that I belong to the _____ community
which is recognized as a backward class by the Govt. of India for the purpose of reservation in
services as per orders contained in Department of Personnel and Training Office Memorandum
No.36012/22/93-Estt(SCT) dated 8.9.1993. It is also declared that I do not belong to the
persons/sections (creamy layer) mentioned in Column3 of OM No. 36012/22/93-Estt (SCT)
dated 08.09.1993 and modified vide Govt. of India, Department of Personnel and Training OM
No.36033/3/2004-Estt (Res) dated 09.03.2004.

Place:

(Signature of applicant)

Date:

(In running handwriting)

**FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES
APPLYING FOR APPOINTMENT TO POST UNDER THE GOVERNMENT OF INDIA**

This is to certify that Shri / Smt. / Kum* _____ son / daughter
of shri _____ of _____ village /town _____ in
District _____ in _____ state belongs to _____ community
which is recognized as a backward class under :-

- (1) Resolution No.12011/68/93-BCC© dated 10th September 1993, published in the Gazette of India - Extraordinary - part 1, Section 1, No.186 dated 13th September 1993.
- (2) Resolution No.12011/9/94-BCC dated 19th October 1994, published in the Gazette of India - Extraordinary – part1, Section 1, No.163, dated 20th October 1994.
- (3) Resolution No.12011/7/95-BCC, dated 24th May, 1995, published in Gazette of India - Extraordinary - part 1,Section 1, No.88, dated 25th May 1995.
- (4) Resolution No.12011/44/96-BCC, dated 6th December 1996, published in Gazette of India - Extraordinary - part 1,Section 1, No.210, dated 11th December 1996.
- (5) Resolution No.12011/68/93-BCC, published in Gazette of India - Extraordinary - No.129, dated the 8th July 1997.
- (6) Resolution No.12011/12/96-BCC, published in Gazette of India - Extraordinary - No.164, dated the 1st Sept 1997.
- (7) Resolution No.12011/99/94-BCC, published in Gazette of India - Extraordinary - No.236, dated the 11th Dec 1997.
- (8) Resolution No.12011/13/97-BCC, published in Gazette of India - Extraordinary - No.239, dated the 3rd Dec 1997.
- (9) Resolution No.12011/12/96-BCC, published in Gazette of India - Extraordinary - No.166, dated the 3rd Aug 1998.
- (10) Resolution No.12011/68/93-BCC, published in Gazette of India - Extraordinary - No.171, dated the 6th Aug 1998.
- (11) Resolution No.12011/68/98-BCC, published in Gazette of India - Extraordinary - No.241, dated the 27th Oct 1999.
- (12) Resolution No.12011/88/98-BCC, published in Gazette of India - Extraordinary - No.270, dated the 6th Dec 1999.
- (13) Resolution No.12011/36/99-BCC, published in Gazette of India - Extraordinary - No.71, dated the 4th April 2000.

Shri/Smt./Kum* _____ and/or his/her family ordinarily reside(s)
in the _____ District of the _____ State. This is also to certify that
he/she does not belong to the persons/sections (**Creamy Layer**) mentioned in column 3 (of the Schedule to the
Government of India, Department of Personnel & Training OM NO.36012/22/93 –Estt(SCT), dated 08.09.1993)
and modified vide Government of India, Department of Personnel and training O.M No.36033/3/2004-Estt.(Res)
dated 09.03.2004.

Place : _____

Signature _____

Dated : _____

District Magistrate/Dy. Commissioner etc.

*Strike out whichever is not applicable (With seal of office)

NB: (a) The term 'ordinarily' used here will have the same meaning as in section 20 of the
Representation of People's Act., 1950.

- The Authorities competent to issue OBC caste certificates are indicated below :-

- (i) District Magistrate / Additional Magistrate / Collector / Deputy Commissioner /Additional Deputy
Commissioner / Deputy Collector / 1st class Stipendiary Magistrate / Sub - Divisional Magistrate / Taluk Magistrate
/ Executive Magistrate / Extra Assistant Commissioner (not below the rank of 1st class Stipendiary Magistrate).
- (ii) Chief Presidency Magistrate / Additional Chief Presidency Magistrate/ Presidency Magistrate.
- (iii) Revenue Officer not below the rank of Tahsildar, and
- (iv) Sub-Divisional Officer of the area where the Candidate and or his family resides.

