



## APPLICATION FORMAT FOR INDIAN CITIZENS

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES**  
**Ansari Nagar, New Delhi – 110 029**

No. F. \_\_\_\_\_

Dated: \_\_\_\_\_

Subject: Application for (Please ✓ one only)	Visiting Professor/Faculty/Fellow (up to 3 months only)	Short-Term Training (up to 6 months only)	Long-Term Training (up to 2 years only)
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1. Name (in Capital Letters) : \_\_\_\_\_

2. Father's Name : \_\_\_\_\_

3. Date of Birth : \_\_\_\_\_

4. Permanent Address : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Affix one recent  
Passport Size  
Photograph Duly  
attested by Gazetted  
Officer

5. Correspondence Address : \_\_\_\_\_  
\_\_\_\_\_

6. Telephone/Fax No. & Email Address (if any): \_\_\_\_\_

7. Citizenship : \_\_\_\_\_

8. Academic Qualification (Graduate/Post Graduate): \_\_\_\_\_  
\_\_\_\_\_

9. Sponsored by (Please ✓ one only):  
University/College  Hospital/Institution  Defence Personnel

10. Sponsored Authority Name : \_\_\_\_\_

11. Sponsoring Authority Status : \_\_\_\_\_

(like Government, Semi-Government, Autonomous, Public Health Sector Organization, MCI / DCI / NCI approved etc. )

12. Working Experience (if any) : \_\_\_\_\_

13. If Employed/Working : \_\_\_\_\_

(Name of Current Post / Designation Held & Date of Joining the Post)

14. Working as Regular / Temporary / Ad-hoc / Contract / Practitioner : \_\_\_\_\_

15. Specific Period & Dates of Training : \_\_\_\_\_

(Period/Duration of Training (in months), Start & End Dates of Training)

16. Discipline/Department : \_\_\_\_\_

(Name of the Department in which training is required – only one department name is to be specified)

DECLARATION: I do hereby declare that the information furnished above is true and correct to the best of my knowledge and I shall abide by the rules and regulation of the AIIMS.

**SIGNATURE OF THE APPLICANT**

### **Sponsoring Authority (With Seal)**

**N.B.** Please affix the following with the application form:

- Sponsoring Authority letter in Original.
- Attested copies of all Certificates/Testimonials.

(The candidate, is advised to fill up each & every column of the application form & read the instructions/guidelines carefully before filling up the form)

**INCOMPLETE APPLICATIONS WILL BE REJECTED STRAIGHTAWAY**