

BHARAT HEAVY ELECTRICALS LIMITED HEEP, RANIPUR, HARIDWAR

BIO DATA

Please affix self attested Passport size photograph

FOR ENGAGEMENT AS PART TIME MEDICAL CONSULTANT

Advertisement No. 01/2023

(Duly filled Bio-Data Form to be brought at the time of Walk-in Interview)

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1. POST APPLIED FOR:
2. NAME (in capital letters as per high school certificate):
3. FATHER'S NAME:
4. DATE OF BIRTH: (dd/mm/yyyy) 5. AGE (in years & months: as on 01.07.2023)
6. CATEGORY (GEN/SC/ST/OBC/EWS): 7. NATIONALITY:
8. PHYSICALLY CHALLENGED? (YES/NO): IF YES(VH/OH/HH): % AGE
9. EX-SERVICEMAN? (YES/NO): IF YES, YEARS OF SERVICE:
10. ADDRESS FOR CORRESPONDENCE

11. EDUCATIONAL QUALIFICATIONS

Qualificati on	College/ University	Full Time/ Part Time	Specialisati on	Period (From -To)	Year of passing	Marks obtaine d	% of marks	Whether recognised by MCI
MBBS								
MD/MS/ DNB/MDS								
PG Diploma								
Others								

12. EXPERIENCE DETAILS

Name of Organisation and Address	Private / Govt/ Semi Govt/ Others	Type of Engagement (Regular/Contract/ Ad Hoc/Private Practice)	Designation/ Area of Work	Period From	Period To

13. Medical Council of India / State Medical Council Registration:

Regn. No.	Date of Regn.		Valid up to			
14. Have/has your parent(s)/spouse been in service of BHEL? (YES/NO)						
If yes, please furnish details:						
(a) Status of Employment: (Serving / Retired / Death during service / Death after service)						
(b) Staff Number & Unit:						
15. Phone number / Mobile No.						
16. E mail ID:						

DECLARATION

I hereby declare that statements made by me in this bio data form are true and complete. If I am engaged and the company finds at any time that any part of the information given by me is incorrect and false or that I have concealed any relevant information, I agree that my engagement shall be liable to be terminated summarily without any notice or compensation.

DATE	SIGNATURE
PLACE	NAME