



Oil & Natural Gas Corporation Limited

APPLICATION

**Affix passport
size
Photograph**

(FILL IN CAPITAL LETTERS ONLY)

1	Post applied for	
2	Sector	Central
3	Interview Center	Agartala
4	Name of the candidate	
5	Nationality	Indian
6	Father's Name	
7	Mother's Name	
8	Date of Birth	
9	Category :	
10	Gender – Male / Female / Other	
11	a) Whether PWBD (Yes /No)	
	b) If yes , Type of Disability	
12	Mailing address :	
	House No. & Street	
	Area	
	City / Town with Pin Code	
	District	
13	Telephone No.	
14	Mobile No.	
15	E-mail address	

16	Qualification:					
	Sl No	Exam Passed	University/ College/ Institute	Year of passing	Class	Percentage of Marks
		M.B.B.S				
		MD /MS				
		MCh/ DM				
		Any other Certificates				
17	Medical Council Registration No. & Place :					

18	EXPERIENCE:					
Sl No	Organisation	Post Held	Period		Last Pay	Nature of duties
			From	To		

Declaration: I hereby declare that the particulars furnished above are true and correct to best of my knowledge and belief. I also declare that I am fulfilling the requisite criteria of qualifications for engagement of Contract Medics in ONGC as per Advt.No 6/2025(R&P). In case of information provided by me being found incorrect or false or I suppressed any relevant information, my candidature may be cancelled at any time.

PLACE:

SIGNATURE :

DATE :

NAME :