ADVT. No.: 3/2024 (R&P)



## ओएनजीसी ग्रीन हिल्स, तेल भवन,देहरादून ONGC GREEN HILLS, TEL BHAVAN, DEHRADUN -248003

## **APPLICATION**

Affix passport size Photograph

(FILL IN CAPITAL LETTERS ONLY)

	(	· ,
1	1 Post applied for	
2	2 Sector	
3	3 Interview Center	
4	Name of the candidate	
5	5 Nationality	
6	5 Father's Name	
7	7 Mother's Name	
8	B Date of Birth	
9	Category: (UR / SC / ST / OBC/ EWS)	
10	0 Gender – Male / Female / Other	
11	1 a) Whether PWBD (Yes /No)	
	b) If yes , Type of Disability	
12	2 Mailing address:	
	House No. & Street	
	Area	
	City / Town with Pin Code	
	District	
13	3 Telephone No.	
14	4 Mobile No.	
15	5 E-mail address	

16	Qualification:					
	SI	Exam Passed	University/ College/	Year of	Class	Percentage
	No		Institute	passing		of Marks
		M.B.B.S / / BHMS				
		MD/MS				
		MCh/ DM				
		Any other Certificates				

17	Medical Council Registration No. & P	ace :		
18	(For Homeopathy Only) NCH/ State Registration No. & Place:			

19	EXPERIENCE:					
SI	Organisation	Post Held	Period From To		Last Pay	Nature of duties
No						

**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 Recruitment of Contract Medics in ONGC as per Advt.No 3/2024 (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 :
DI V( F.	
FLACE.	SIGNATORE .

DATE: NAME