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Important Dates						
Instructions for filling the Form	1	Assistant Professor	2019/183	Anatomy	SC	APPLY NOW
Contact Information						
Bank Details for Payment						

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Important Dates	Date	Friday, September 13, 2	2019		
Instructions for filling the Form	Department	Anatomy			
Contact Information	Post	Assistant Professor			
Bank Details for Payment	Category	SC	\sim		
	Applicant Name:	First Name	Middle Name	Last Name	
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	Step 1: Personal Details	Step:2 Educational / Profession	onal Step:3 Payment	Step: 4 Print Application
* denotes mandatory fields				
Personal Details				
Applied for Tutor/Clini	cal Instructor (Nursing))	Advt. No	2019/07
Name: Anurag				
Krishna			Father's Name:	SURENDRA PRASAD SHUKLA
Shukla				
Date of Birth				k
(DD/MM/YYYY)*: 02/10/1988			Age	* 30 Year(s) 10 Month(s) 23 Day(s)
Gender*: Male	•		Nationality	INDIAN
	_			
Marital Status:* Married	•		Spouse Name	
Category [*] : UR	•	Reservat	ion Desired (PWBD)	: 🔘 No 🖲 Yes
Job Category [*] Medical		T	Reservation Type	One Leg Disability
Council. State Madhya Prad	esh 🔻	Nu	rsing registration No	12345
Contact Details				
Correspondence				Click if Permanent Address is same as
Address*: PLOT NO-2	77, CHANKYAPURI			Correspondance Address
		/	Permanent Address*	PLOT NO-277, CHANKYAPURI
Country [*] : India		¥	Country	India
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Marital Status: [*]	Married V	Spouse Name:	
Category*:	UR V	Reservation Desired (PWBD):	◯ No ● Yes
Job Category [*]	Medical T	Reservation Type	One Leg Disability
Council. State	Madhya Pradesh	Nursing registration No	12345
Contact Details			
Correspondence Address*:	PLOT NO-277, CHANKYAPURI		Click if Permanent Address is same as Correspondance Address
	<i>li</i>	Permanent Address*:	PLOT NO-277, CHANKYAPURI
Country*:	India 🔻	Country [*] :	India 🔹
State [*] :	Uttar Pradesh 🔻	State [*] :	Uttar Pradesh 🔹
City:	KANPUR	City:	KANPUR
Street [*]	CHANKYAPURI	Street	CHANKYAPURI
PIN Code [*] :	208020	PIN Code [*] :	208020
Police Station [*] :	RATANLALNAGAR	Police Station *:	
Mobile Number [*] :	8458804784	Email ID [*] :	ANURAG.ITPROFESSIONAL@GMAIL.COM
Land line number:	91 0512 295042	Land line number:	91 0512 295042
		Mobile Number [*] :	8458804784
Unique Performan is an Institute of Na	tional Importance)		ted to achieve the mandate of AIIMS Rishikesh which
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Date of Birth		_	Ago*		
(DD/MM/YYYY) [*] :	02/10/1988		(as on 25/08/2019)	30 Year(s) 10 Month(s) 23 Day(s)	
Gender [*] :	Male V		Nationality:		
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Category*:	UR T		Reservation Desired (PWBD):	🖲 No 🔘 Yes	
Job Category [*]	Medical	•	Reservation Type		
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Contact Details					
Correspondence Address*:	PLOT NO-277, CHANKYAPU	RI		Click if Permanent Address is same as Correspondance Address	
		/	Permanent Address*:	PLOT NO-277, CHANKYAPURI	
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City:	KANPUR		City:	KANPUR	
Street	CHANKYAPURI		Street	CHANKYAPURI	
PIN Code [*] :	208020		PIN Code [*] :	208020	
Police Station [*] :	RATANLALNAGAR		Police Station *:	RATANLALNAGAR	
Mobile Number [*] :	8458804784		Email ID [*] :	ANURAG.ITPROFESSIONAL@GMAIL.COM	
Land line number:	91 0512 29504	2	Land line number:	91 0512 295042	
			Mobile Number [*] :	8458804784	
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	I see myself as totall	y personally a	ccountable for my success at work a	nd know how to instill that mindset	
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ALL INDIA INSTITUTE OF MEDICAL SCIENCES, RISHIKESH RECRUITMENT NOTIFICATION FOR AIIMS, VIJAYPUR (JAMMU)

Step 1. Personal Details	Step:2 Educational / Prote	step:5 Payment	Step: 4 Print Application	
Subjects/Speciality	Board/University	Year	Marks Obtained	Total Marks
science	UP Board	2002	200	3000
Art	UP Board	2004	10	52
Hindi	RGPV	2007	30	40
English	RGPV	2009		
				Save
	Subjects/Speciality science Art Hindi	Subjects/Speciality Board/University science UP Board Art UP Board Hindi RGPV	Subjects/Speciality Board/University Year science UP Board 2002 Art UP Board 2004 Hindi RGPV 2007	Subjects/Speciality Board/University Year Marks Obtained science UP Board 2002 200 Art UP Board 2004 10 Hindi RGPV 2007 30

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After submitting personal details, you will be redirected to educational details page, fill your educations one by one.

Step 1: Personal Details Step:2 Educational / Professional Step:3 Payment Step: 4 Print Application

O A	dd								
6 No	Education Speciality	Institute	University	Year	Subject	Marks obt./Grade	Marks Tot.	Per.	Action
1	BSc	AIIMS Delhi	AIIMS Delhi	2018	Nursing Subjects	400	500	80.00	&∣×
2	12 th	Central school	CBSE	2015	General Hindi, English, math, physics, chemistry	300	500	60.00	&∣×
3	10 th	Central School	CBSE	2013	Hindi, English, Math, Science, Social Science,Sanskrit	350	500	70.00	&∣×
Profess	sional Experience								
Publica	tion (Enter only Pubmed In	dexed applic	ations)						
Awards	s, Distiction & Prize, If any								
	Presentation								

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Step 1: Personal Details Step:2 Educational / Professional Step:3 Payment Step: 4 Print Application

1. Educational Details		
2. Professional Experience		
O Add		
S.NO. Designation Colleg	WORK EXPERIENCE(after attaining minimum eligibility criterian)	Action
2 Nursing Officer AIIMS	Designation (s)	&∣×
S. Publication (Enter only Pubmed Indexe	From (DD/MM/YYYY) To (DD/MM/YYYY)	•
4. Awards, Distiction & Prize, If any	Save	
5. Paper Presentation		
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	Click add button to add experience one by one.	

	tional Details sional Experience					
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0 A NO.		College/Institute	From	То	Total Exp.	Action
1	Nursing Officer	AIIMS RISHIKESH	01/1/2019	10/8/2019	0 Year(s) 7 Month(s) 9 Day(s)	& ≍
2	Nursing Officer	AIIMS Delhi	01/7/2018	31/12/2018	0 Year(s) 5 Month(s) 30 Day(s)	& ×
Iblic	ation (Enter only Pub	ned Indexed applications)				
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1. Educational Details	
2. Professional Experience	
3. Publication (Enter only Pubmed Indexed applications)	
O Add	
S.NO. Citation in Vancouver style	Action
Hanna JN, McBride WJ, Brookes DL, Shield J, Taylor CT, Smith IL, Craig SB, Smith GA. Hendra virus infection in a veterinarian. Med J Aust. 2006 Nov 20:185(10):562-64.	la an
2 . Fletcher D, Wagstaff CRD. Organisational psychology in elite sport: its emergence, application and future. Psychol Sport Exerc. 2009;10(4):427-34. doi:10.1016/j.psychsport.2009.03.009.	&∣×
Bengtsson S, Solheim BG. Enforcement of data protection, privacy and security in medical informatics. In: Lun KC. Degoulet P. 3 Piemme TE, Reinhoff O, editors. MEDINFO 92. Proceedings of the 7th World Congress on Medical Informatics; 1992 Sep 6-10; Geneva, Switzerland. Amsterdam: North Holland; 1992. P. 1561-5	& ⊺ ×
4. Awards, Distiction & Prize, If any	
5. Paper Presentation	
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ALL INDIA INSTITUTE OF MEDICAL SCIENCES RISHIKESH

TUTOR/CLINICAL INSTRUCTOR (NURSING)

APPLICATION NUMBER: AIIMSRISH005

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	NAME:			ANURA	G KRISHNA SH	UKLA						ED PASSPORT
	FATHE	R'S NAME:		SURENI	RA PRASAD S	HUKL	A			4		HOTO HERE
	DATE O	F BIRTH		02-10-1	988 ; AGE: 30	YEAR	(S) 10 MONTH(S) 2	3 DAY(S)				
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	SPOUSI	E NAME.:										
	MED. C	OUNCIL REG	ISTRATION N	i O. 12345								
	STATE:			MADHY	A PRADESH					fin -	-	111
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1.	RESERV	ATION DESI	RED (PWD):	YES RE	SERVATION T	PE C	NE LEG DISABILITY	(-			
	CONT	ACT DE	AILS	· · · · ·								
2.	CORRE	SPONDENCE	ADDRESS:	PLOT N	D-277, CHANK	YAPUI	RI					
3.	CITY:			KANPUI	2							
4.	STATE:			UTTAR I	PRADESH							
5.	COUNT	RY:		INDIA								
6.	PINCOI)E:		208020								
7.	POLICE	STATION:		RATANL	ALNAGAR							
8.	PHONE	NUMBER:		91-0512	-295042							
9.	MOBILI	E NUMBER:		845880	4784 20.EMA	IL ID:	ANURAG.ITPROFES	SIONAL@GMAI	L.COM			
1.	EDU	CATIONA	L OUALIE	FICATION								
	S.NO.	COURSE NAME	SPECIALITY	INSTITUTE	UNIVERSITY	YEAF	R SUBJECT			MARKS OBT./GRADE	MARKS TOT.	PERCENTA
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	2	12 TH		CENTRAL	CBSE	2015	GENERAL HINDI, I		, PHYSICS	300	500	60.00
				SCHOOL CENTRAL			CHEMISTRY HINDI, ENGLISH, N	AATH SCIENCE	SOCIAL			
	3	10 TH		SCHOOL	CBSE	2013	SCIENCE, SANSKRI		SOCIAL	350	500	70.00
22.	PRO	FESSION	AL EXPE	RIENCE								
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	1	NURSING OF	FICER	AIIMS RISHIK	ESH		UESDAY, JANUARY , 2019	SATURDAY, AU 10, 2019	GUST 0 Y	'EAR(S) 7 MONTH([S] 9 DAY(S])
	2	NURSING OF	FICER	AIIMS DELHI			UNDAY, JULY 1, 018	MONDAY, DECEMBER 31	, 2018 0 Y	'EAR(S) 5 MONTH((S) 30 DAY(s)
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5		COURSE NAME	SPECIALITY	INSTI	TUTE	UNIVERSITY		-			MARKS OBT./GRADE	MARKS TOT.	PERCENTAGE
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ALL INDIA INSTITUTE OF MEDICAL SCIENCES RISHIKESH

TUTOR/CLINICAL INSTRUCTOR (NURSING)

APPLICATION NUMBER: AIIMSRISH005

PEI	RSON	AL DETA	ILS												
									(DI DAGD				
	NAME:			ANURA	ANURAG KRISHNA SHUKLA							PATSE HERE ED PASSPORT			
	FATHE	R'S NAME:		SUREN	SURENDRA PRASAD SHUKLA					4		IOTO HERE			
	DATE O	F BIRTH		02-10-1	02-10-1988 ; AGE: 30 YEAR(S) 10 MONTH(S) 23 DAY(S)					HOTO I					
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1.	RESERVATION DESIRED (PWD):				MADHYA PRADESH UR YES RESERVATION TYPE ONE LEG DISABILITY										
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2.	CORRE	SPONDENCE	ADDRESS:	PLOT N	PLOT NO-277, CHANKYAPURI										
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_	STATE:				PRADESH										
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_		POLICE STATION:			208020 RATANLALNAGAR										
_	PHONE NUMBER:				2-295042										
.9.	MOBILI	E NUMBER:		845880	4784 20.EMA	IL ID:	ANURAG.ITPROFES	SIONAL@GMAIL	COM						
21.	EDUCATIONAL QUALIFICATION														
	S.NO.	COURSE	SPECIALITY	INSTITUTE	UNIVERSITY	YEAR	SUBJECT		MARKS	MARKS	PERCENTA				
		NAME STECHALTT INSTITU								OBT./GRADE	TOT.	00.00			
	2	BSC 12 TH		AIIMS DELHI CENTRAL	CBSE	2018	NURSING SUBJECTS GENERAL HINDI, ENGLISH, MATH, PHYSICS,			400 300	500	80.00			
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PAPER PRESENTATION								
UPP: UNIQUE/SPECIAL REASONS WHY YOU ARE SPECIALLY OR UNIQUELY COMPETENT/MOTIVATED TO HELP ACHIVE THE MANDATE OF AIIMS BHOPAL WHICH IS AN INSTITUTE OF NATIONAL IMPORTANCE.								
I SEE MYSELF AS TOTALLY PERSONALLY ACCOUNTABLE FOR MY SUCCESS AT WORK AND KNOW HOW TO INSTILL THAT MINDSET INTO EVEN EMPLOYEE THAT WORKS FOR AND WITH ME TO CREATE SUCCESS FOR THE ORGANIZATION AS A WHOLE.								
PROOF OF PAYMENT								
PAYMENT ID:NIL PAYMENT AMOUNT: NIL								
TRANSACTION NO: NIL								
DECLARATION								
I ANURAG KRISHNA SHUKLA HEREBY DECLARE THAT ALL THE STATEMENTS MADE IN THIS APPLICATION ARE TRUE, COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. IN THE EVENT OF ANY INFORMATION BEING FOUND FALSE OR INCORRECT OR INELIGIBLE AND DELETED BEFORE OR AFTER EXAM / INTERVIEW, I HEREBY CONVEY MY CONSENT FOR CANCELLATION OF MY CANDIDATURE.								
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