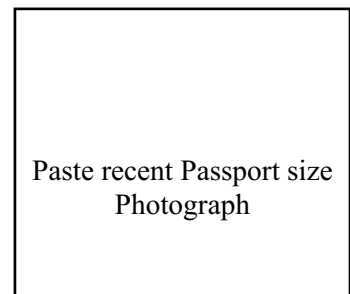




BANGALORE BAPTIST HOSPITAL

Bellary Road, Hebbal, Bellary Road, Bangalore – 560 024

APPLICATION FOR ADMISSION TO FELLOWSHIP IN NON-INVASIVE CARDIOLOGY PROGRAMME (Affiliated to Rajiv Gandhi University of Health Sciences)



I. PERSONAL INFORMATION

- 1. **Name of the Candidate** :
(Give full name in Capitals)

- 2. **Gender: Male/Female** :

- 3. **Date of Birth & Age** :

- 4. **Name of the Father/Spouse** :

- 5. **Present Address** :
.....
.....

- 6. **Permanent Address** :
.....
.....

- 7. **E-Mail ID** :

8. Telephone Residence :

Mobile No :

9. Medical Council Registration No. :

10. Languages known :

11. Person to be notified in the event of emergency with contact Number :

:

.....

II. PROFESSIONAL QUALIFICATIONS (In Chronological Order MBBS onwards):

Course Name (eg. MBBS, DNB/MD)	Area of specialization	Year of Passing	Name of the Medical College/Hospital/Institute with City & State	Qualification Registration Number	Name of the Medical Council

III. EXPERIENCE (if any) AFTER PG DEGREE QUALIFICATION

Period of Employment Present/Past			Designation Held	Hospital/Institute Name with City & State	Employment Status (full time / part time)
Present / Past	From (Month-Year)	To (Month-year)			

IV REFERENCES:

1. Name:

Contact No.

Address:

2. Name:

Contact No.

Address:

I hereby declare that:

I, Dr..... hereby confirm that the above mentioned information are true and correct to the best of my knowledge & belief.

.....

Signature of the Candidate

Date:

Place:



Duly filled in Application form along with the attachments should be forwarded by mail to medsec@bbh.org.in or by post to :

**Medical Secretary
Bangalore Baptist Hospital,
Hebbal, Bellary Road,
Bangalore 560 024
Telephone 080 – 22024700 /315**

**Last date for submission for application: September 23rd 2020
Date of Interview : September 25th 2020
Time : 2.00pm
Place of Interview : Board Room (Administration)
Bangalore Baptist Hospital,
Hebbal, Bangalore**

PLEASE BRING THE FOLLOWING DOCUMENTS FOR INTERVIEW

- Hard copy of the filled in Application Form
- Recent Passport size Photographs – 6 Nos
- Original documents for verification : Qualification certificates (including X Grade marks card, MBBS Marks cards, MBBS Degree certificate, MD/DNB certificate) Medical council certificates, Original Aadhaar Card and PAN Card.
- No Objection Certificate from Medical council to register at Karnataka Medical Council. (for outstation candidates)
- Experience certificates if any
- Copies of all the certificates for submission.
- Wearing of Mask is mandatory