

SHRI VASANTRAO NAIK GOVT.MEDICAL COLLEGE, YAVATMAL

Application for the posts of Senior Resident in Subject _____

Recent
Photograph

To,
The Dean,
Shri V. N. Govt. Medical College,
Yavatmal.

1. Name in Full (In Block Letters) _____
2. Postal address: _____
3. Date of Birth : _____ 4. Caste Category:_____
5. Date of Internship completion:- _____ 6. Registration No:_____
7. Subject Choice: _____

Subject	Out of Marks	Obtained Marks	Attempt in Concerned subject	Deduction of Marks (To be filled by Scrutiny Committee)

8. Aggregate marks of MBBS: _____ (Out of)
9. Attempts in MBBS: First MBBS _____
- Second MBBS _____
- Third MBBS _____
10. Name of College from where _____
11. Name of the University: _____
12. Whether registered for any : Registered for_____
- Post Graduate/Degree/Diploma Order No & Date _____
13. Post Graduate (Diploma / Degree please give details: _____

Diploma / Degree	Year of Passing	University

PAST EXPERIENCE

14. Post or Posts previously done with dates of there of and name of the institution:

Sr. No.	Post	Period	Name of Institute
1			
2			
3			
4			
5			

DECLARATION

The information furnished in this application from is complete and correct to the best of my knowledge and any proof contrary to this will make me liable for necessary disciplinary action.

Place :-Yavatmal

Date :- / /2026

Signature of the applicant.

List of Certificate Attached:-

- 1.Mark sheets of 1st , 2nd & 3rd MBBS (All Pass/Fails Marksheets)
- 2.Attempts Certificates
- 3.MD/MS Marksheet
- 4.DOB Certificates (Proof)
- 5.MMC Registration Inter. Comp. Certificate
- 6.MCI/NMC Recognized Degree UG/PG Certificate
- 7.Caste Certificate/ Validity Certificate
- 8.Registed for PG Course Diploma / Degree,Please attached registration letter
- 9.Post experience certificate,Please attached date-wise

Remarks of Scrutiny Committee:-