

MALABAR CANCER CENTRE

(an autonomous centre under Government of Kerala) Thalassery, Kannur – 670 103, Ph: 0490 2355881, Fax: 0490 2355880

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(FOR ACADEMIC STAFF)

APPLICATION FORM FOR THE POST OF.....

......DEPARTMENT

Read the Notification carefully before filling up the application form. Incomplete applications will be summarily rejected. All the columns are to be compulsorily filled neatly in capital letters or printed on A-4 size paper. If any columns are irreverent to the candidate mark N.A

1. Name of the candidate as in records (in capital letters)	
2. Full address for communication (in capital letters)	
	 Passport size photograph to be attested by a
	· Gazetted Officer
Phone :	
Mobile :	
E-mail :	
District:PIN :	
3. Name, designation and office seal of the identifying officer attesting the photograph	
(office seal)	
4. Sex 5. Religion/Caste	

5. (a) Age (completed years) as on 1 st January of the year of notification of post	Years: Months:Days:
(b) Date of birth in Christian Era	
(c) Are you eligible for Age Relaxation? If yes, give details	
6. Place of birth (<i>Item marked * are mandatory</i>)	Place *:
	Village:
	Taluk :
	District*:
	State *:
	Country*:
7. Are you a Citizen of India by birth and/or by domicile?	Yes/No
	If No, Specify
8. Name and Address of Father/Mother along with present or last occupation	

9. Academic Record (Medical Curriculum):

Examination passed	Discipline/ Specialization	College/ Institute	Board/ University	Year of Passing	Marks in %	Class/ Grade
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10. Research Experience:

From Date	To Date	Months/Years	Organization	Designation	Job Profile

11. Professional Experience:

From Date	To Date	Months/ Years	Organization	Designation	Job Profile	Salary

12. Number of Publications in Peer reviewed Journals, Enumerate (mention the number of Publications and attach the details as **Appendix I**)

13. Number of scientific papers including posters presented after completion of PG Degree/ Qualifying examinations for the post (mention the number of Publications and attach the details as **Appendix I**)

14. Research Project/Studies under taken, Enumerate (mention the number of Publications and attach the details as **Appendix II**)

15. Any specialized training obtained, Mention				
16. Name and Address of referee from whom testimonials are attached (<i>Testimonial from a prominent</i> <i>researcher/teacher in the field of your</i> <i>specializations, giving his/her</i> <i>assessment of your academic,</i>	Name & Address of Referee Tel: Email:			
scholarly and professional competence				
is required. Attach as Appendix III)	Mobile:			
17. Name and Address of recent employer/Head of Education Institution (or a public figure) from whom a testimonial about your character, conduct and personal integrity (Attach as Appendix IV)	Name & Address of Referee			
	Tel:			
	Email:			
	Mobile:			
18. Countries and major institutions visite	ed:			
19. Statement of Objectives: Please write in a page as to how you would propose to build your academic career and what specific innovations and developments you propose to bring in academics if you are selected. (Attach as Appendix V) <i>Mention 3 highlights of your statement of objectives below:</i>				
20. Particulars of documents produced to	o prove payment of application fee.			
21. Dortioulors of documents to prove as	in qualification ato (Enclose attacted conice of			
21. Particulars of documents to prove age qualification etc. (Enclose attested copies of documents mentioned).				
22. Have you been debarred from appearing for any exam conducted by any Central/ State Government/ Quasi Government bodies/ Dismissed from service or convicted by a Court of Law. Yes/ No. If yes give details:				
23. Any other information that is likely indirectly, either in support or otherwise.	y to be relevant to this application directly or			

24. List of Enclosures

DECLARATION

I hereby declare that I have carefully read and fully understood all the instructions and details pertaining to the post being applied by me and all statements made and information furnished in this application are true and complete to the best of my knowledge and belief. I also declare that I have not concealed any material information which may debar my candidature for the post applied for. In the event of suppression or distortion of any fact including category or educational qualification, etc. made in my application form, I understand that I will be denied any employment in the Institute and if already employed on any of the posts in the Institute, my services will be terminated forthwith.

Place:

Date: _____

Signature of the candidate

NB: All applicants are informed that canvassing in any form will lead to their applications being rejected. Defective applications in any respect will be summarily rejected. If the space provided in the application form is insufficient, separate sheets of paper may be attached and pinned to the main application form and reference to the same made in the relevant column.

(Self attested copies of all papers listed below to be attached) Part A: Journal Papers				
SI No.	Part A: Journal Papers Journal Paper: Author(s), Title, Journal Name, Vol, No, Month & Year, Pages	Initials		

APPENDIX-I Publication List: (Self attested copies of all papers listed below to be attached)

Part – B: Conference Papers				
SI No.	Author(s), Title, Conference Name, Organisers Name, Month & Year, Pages in Proceedings, if any.	Initials		

Part C

Give List of books published. Indicate edited works specifically. Year of publications, no of editions, publisher, no of pages and ISBN may be provided.

Part D

Give List of patents filed/granted. Give title, year, file number/patent number, details of any licensing, full details of holders.