OFFICE OF THE PRINCIPAL, GOVERNMENT MEDICAL COLLEGE, NIZAMABAD, TELANGANA Notification No.524/GMCNZB/2021, Dated: 22/7/2021.

APPLICATION FORMAT FOR THE POST OF Lab Technician (on Outsourcing basis)

1.Applying for		Lab Technician Gr-II				Paste here (do not
2.Full Name (in	pin or staple) a recent clear and coloured passport size photograph					
3.Fathers / Hush	oand's Name	(in CAPITAL	letter)]
4.Sex	Male	Female]			
5.Date of Birth	DD	ММ	YY	Age		
6. Local / Non Local						
7.Community	SC	ST	BC-with Group	ОРН	OTHERS	
8. Details of Exa	mination Pas	sed			I .	1
Degree / Discipline Passed 1.Bsc MLT 2.DMLT 3. MLT		University /	Institution	Month & Y	Year of Passing	Marks %
9.Details of emp Institutions only	-	Bcs MLT/DI	MLT / MLT E	Experiance (i	f any in Govt. Hos	pitals / Private
	Name of the Hospital / Private Institution		Position		Period	Total Service
				From	То	-

10.Address for Communication

Name:	
Phone (with STD Code):	
Mobile:	
Email:	
Address (Present):	
Address (Permanent):	

Note: Enclosures

- 1. Proof of Date of Birth (SSC Certificate)
- 2. Local Candidate Certificate issued by concerned competent authority.
- 3. Caste Certificate issued by concerned competent authority.
- 4. Bonafied Certificate 4th to 10th
- 5. Intermediate
- 6. DMLT (OR) B.SC.(MLT) from recognized institutions.
- 7. 02 years intermediate vocational MLT course and have completed (1) year clinical training in selected Government Hospital in which these students have been permitted to undergo clinical training/completed (1) year Apprentice training in identified Hospitals and awarded "Apprenticeship Completion certificate" by the Board of Apprentice Ship training,
- 8. Registered with Paramedical Board
- 9. Four Passport Size photographs.
- 10.Govt. / Private Service Experience certificate.
- 11.Aadhar card.

All the above documents should be submitted Enlcose with application, after selection the originals should be submitted during joining.

The selected candidates shall join the post within 7 days after receiving the appointment orders.

Declaration / Undertaking

- 1. I hereby declare that the information furnished by me in the Application Form is correct and nothing has been concealed. In case any information furnished by me is found to be false, my candidature for recruitment may be cancelled.
- 2. I am willing to work in Covid-19 duties at Govt. General Hospital, Nizamabad

Name: Signature of the Candidate	