

SRI VENKATESWARA INSTITUTE OF MEDICAL SCIENCES &

SVIMS SRI PADMAVATHI MEDICAL COLLEGE FOR WOMEN, SVIMS UNIVERSITY, TIRUMALA TIRUPATI DEVASTHANAMS, TIRUPATI – 517 5017; A.P.

APPLICATION FORM FOR FACULTY INTERNAL PROMOTIONS UNDER APS

Last	t Date for su	ubmi	ssion	of A	ppli	catio	ns :	On o	or befo	ore 5:	00 PM of	30/09/202	25
Post a	pplied for :												
1. Na	me in full (in l	Block	Letter	s)		:							
2. Fat	ther's Name					:							
3. Ad	dress for com	munic	ation &	& Coi	ntact	Nos.:							
4. Dat	te of Birth	D	D	M	M	Y	Y	Y	Y		Age(yrs)	
	& Age												
	tionality & Ro									Cat	egory:		
S.No.				College & University]	Year passed		MCI (NMC) Recog- nition	APMC Regn. No.		
01	MBBS												
02	MD / M.S./I (speciality)	DNB											
03	DM / M.Ch. (speciality)	/DNI	3										

7. Details of previous appointments / Teaching Experience :

S.No.	Position	Name of the Institution	From	То	Experience in years & months
01	Tutor / Registrar / Demonstrator / Junior & Senior Resident				

02	Assistant Professor		
03	Associate Professor		
04	Professor (Scale – I)		
05	Professor (Scale – II)		

8. Research publications in indexed journals for the period of assessment (List may be enclosed):

S.No.	Authors Listing	Title of the Paper	Journal Name / Year / Vol. / Page nos.	Indexed in (As per NMC Guidelines)

09. Any other additional particulars: may also be submitted in separate sheets, with signatures.

DECLARATION

I hereby declare that the contents of the application form and documents / certificates submitted by me along with the application are absolutely true, correct and authentic.

In the event of any of the information submitted in the applications / enclosures in this application is found incorrect or false at later date, the undersigned is liable for necessary action as per rules.

PLACE:

DATE: SIGNATURE OF THE CANDIDATE

Enclosures:

- 1. Xerox copies of certificates of
 - a. SSC
 - b. MBBS
 - c. MD/MS
 - d. DM/M.Ch.
 - e. Valid Andhra Pradesh Medical Council registration certificate for UG, PG & Superspeciality
 - f. BCBR Completion Certificate
 - g. RBCW & CBME Training Certificates
 - h. BCMET Training Certificates
- 2. Two passport size photographs.
- 3. Xerox copies of publications as detailed under Sl.No.08. for the period of assessment.
- 4. Filled in screening Committee Metrics For Assessment Promotion Scheme (APS)

Note:

Incomplete applications in any aspect (either incomplete information or incomplete documents / enclosures) shall be summarily rejected.