

**SRI SATHYA SAI INSTITUTE OF HIGHER MEDICAL SCIENCES,  
PRASHANTHIGRAM-515134, ANANTAPUR DIST. (AP) INDIA**

**(Accredited by the National Board of Examinations)**

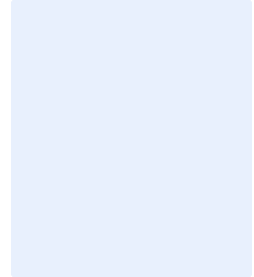
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**APPLICATION FORM FOR VACANT POSTS IN SSSIHMS, PG.**

1. Post Applied For \_\_\_\_\_
2. Date of Application \_\_\_\_\_
3. Advertisement Reference \_\_\_\_\_



**Personal Details:**

Name of the Candidate (In Block) \_\_\_\_\_

Marital Status \_\_\_\_\_ Nationality \_\_\_\_\_

Father's / Husband's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Permanent Address \_\_\_\_\_

Present Address \_\_\_\_\_

Phone Number (with STD Code) \_\_\_\_\_

Mobile Phone number \_\_\_\_\_

Email Address \_\_\_\_\_

Educational Details

#	Courses / Degrees	School / College	Board / University	Pass Year/Month	Grade / % of Marks

Employment Details

#	Institute / Hospital	Department / Speciality	Designation	Work Duration	
				From	To

References (If Any):

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I, \_\_\_\_\_, certify that the information/details given above are correct and true to the best of my knowledge and belief.

Date:  Place:	Signature   Name in BLOCK Letters
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Enclosures:

1. Copies of Certificates (Date of Birth, Educational/Technical qualifications and Experience):
  - a.
  - b.
  - c.
  - d.
  - e.
  - f.
2. Passport Size Photographs (2 copies)