





9. Physiology Details:

Religion		Nationality	
Marital Status			
Disability of permanent nature or chronic illness, if Any			

10. Please name two references who are not your relative and who can certify about your Work and conduct:

(1).	(2).
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11. Any other relevant Information:

I solemnly declare that the particulars furnished in this application are true and correct. I clearly understand that any misstatement of fact contained herein or willful concealment of any material fact will render me liable to appropriate action as may be decided by UHS-AMC. I accept all the terms & conditions mention in the advertisement issued by The Urban Health Society, Ahmedabad.

Place:

Date :

Signature :

N.B. (1) Candidates should furnish with this application true copies of all the certificate, testimonials of education qualification from S.S.C. Onwards and experience & computer etc., duly certified by Gazetted Officers.

(2) Application with incomplete information will not be accepted.

(3) The application should be in the candidate's own handwriting.

# ENCLOSURES

Sr. No.	Documents	Page no.
1	Proof of Birth (Birth certificate or school leavening certificate)	
3	S.S.C.& H.S.C. Mark Sheet (including mark sheet of failure)	
4	Degree Mark Sheet (including mark sheet of failure)	
5	Mark sheet & Degree Certificate of any additional Qualification (including mark sheet of failure)	
6	Degree Certificate	
7	PG Degree Certificate – if available	
8	Experience Certificate	
9	Computer Certificate	
10	Gujarat council registration Certificate	
11	Any other documents (mention)	