

DEPARTMENT OF PSYCHIATRY

Application Format for ICMR Funded Project: A Multi-Centric Randomized Controlled Trial to Assess Effectiveness of the Brief Nursing Intervention for Depression in Pregnancy (BIND-P Study)

Trial Number: CTRI/2018/07/014836

All the columns are to be compulsorily filled in neatly in capital letters or printed on A-4 size paper

Application For the Post of.....

Adv Ref No :

1. Name of applicant :
2. Date of Birth :
3. Male/ Female :
4. Nationality :
5. Father's Name :
6. Address of Communication :

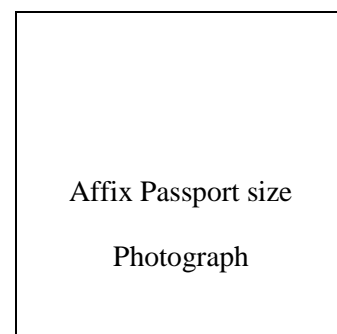
7. Permanent Address :

8. Telephone No. & Mobile No :

9. E-mail :

10. Whether belongs to SC/ST/OBC/ Physically Handicapped /Ex-Servicemen (*Specify and enclose valid certificate*)

11. Have you ever been convicted by a court of law or is there any criminal case/ disciplinary action / vigilance enquiry pending against you? If so specify



12. Educational Qualifications (Attach attested copies of certificates / mark sheets, etc.)

Examination Passed	Year of passing	Division with % of marks	Board/ University
10 th			
12 th			
B.Sc/BA			
M.Sc/MA			
NET/ CSIR/UGC/ICMR			
Any other (specify)			

13. Details of previous employment/ fellowship (if any)

Post held	Department/Institute	Permanent / Temporary /contract	Period of Employment From to	Scale of Pay	Gross Amount

14. Research Experience

15. Publications :

16. Awards/ Recognitions :

17. In about one paragraph, please describe how your expertise would complement the proposed research project

18. Any other significant information:

19. Checklist for submission of self-attested photo copy of certificates :

- Proof of date of birth
- Educations qualifications
- Experience certificates
- Caste certificate , Caste validity certificates and Non Creamy layer certificate if applicable
- Publications/ Paper Presentation certificates
- Any other relevant certificates

DECLARATION BY THE CANDIDATE

- I hereby declare that the entries made in this application form are correct to the best of my knowledge and belief.
- If selected, I promise to abide by the rules and discipline of the ICMR and BKL Walawalkar Rural Medical College, Sawarde.
- I note that the decision of the selection committee is final in regard to selection for this post.
- I have gone through the Fellowship Rules and conditions of the award and if selected, I agree to abide by them.
- I am prepared to present myself for interview/examination at my own expenses, if called upon to do so.

Place :

Date :

Signature of Candidate :

Please submit at: either by speed post or by email

Dr. Ramdas Ransing

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