

Institutional Ethics Committee (IEC) Department of Pharmacology, Govt. Medical College, Nagpur.

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No.2334 EC/Pharmac/GMC/NGP/

Date: 22/7/2021

 $\underline{\text{Note}}$: All the columns and fields must be filled in words with legible hand writing, not by dashes and dots. No column should be left blank. Without changing the serial number, order, columns, the applicant may add rows if he / she thinks the given space is insufficient.

Annexure

S.No	0_/	Partic	culars		A CC			
1	Full Name in Capital letters: Mr./Miss/Mrs			7	Affix recent passpo size Photograph Self attested			
2	Father / Husband		eleka j		Self attested			
3	Age / Gender	Age:	Gender:					
4	Present Address				The A			
5	Permanent Address	- To the						
6	Contact number	Telephone:						
		Mobile num	ber:		- House			
7	E mail address							
3	Date of Birth as per SSC marks card		11 11					
	Marital status (Married/Single)							
0	Nationality							
1	Qualifications (Comme	ncing from M	atriculation or equive	lent aven:	4:			
	D. C.	Year of passing	No. of attempts	% of mark	s scored			

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12	Any additional qualifications:						
13	Particulars of empl	ovment or Wo	rk Experience	in chronologie	1 2 1		
	Name of th	e Date of joining	Date of leaving	Nature of work performed / b	Salary		
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4	Provide additional information on Research experience if any as per format						
1.	Name of the institute	Name of the project	Level of participation	Duration of	Duration of participation		
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i	Mention here details of any otl nformation relevant he application		81,				