

NALAM HOSPITAL

A Multi Speciality Diabetes & Ortho Hospital
63/2, Lake Road, Sriram Nagar, Theni - 625 531.

JOB APPLICATION FORM

(Kindly download & fill this application form in your own handwriting with black ink, scan and mail to us at admin@nalamhospital.in)

Name						Paste recent photo
Age		Date of Birth		Male	Female	
Parent / Guardian	Name					
	Occupation					
	Address					

Present Residencial Address			

Permanent Address			

Contact number	Mobile		Land Line	
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E.mail				
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Family Setup	Relationship	Name	Occupation
	Father		
	Mother		
	Brother 1		
	Brother 2		
	Sister 1		
	Sister 2		
	Wife / Husband		
	Children 1		
	Children 2		

* If more relationships exist kindly enter the same at the end of application form

Religion		Caste	
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Education Details

Course	Degree	Name of the Institute	Period	Mark Percentage
Schooling				
Higher secondary				
Under Graduation				
Post Graduation				

Additional Qualifications (if any)

Course	Degree	Name of the Institute	Period	Mark Percentage
Schooling				
Higher secondary				
Under Graduation				
Post Graduation				

Awards / Certificates (if any)	

Hobbies (if any)	

Languages Known	Speak	
	Read	
	Write	

Past Job Details

Post	Company	Duration	Pay Scale	Reason for Quitting

Department & Post Applied for	
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Applied in Reference to <small>(News Paper / Referral)</small>	Dinamalar <input type="checkbox"/> Dinathanthi <input type="checkbox"/> Dinakaran <input type="checkbox"/>
	Referred by :
	Others(Plz specify) :

Preferred Timing of Work	
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Preferred Salary Range	
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Expected Job Longevity	
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Hostel accommodation required (Only for females)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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References	Name	Designation	Recommendation Letter			
			Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
			Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
			Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Place :

Date :

Signature

For official use only	Date	<input type="text"/>	No	<input type="text"/>
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