



Application for the post of Medical Officer  
XXXVI Indian Scientific Expedition to Antarctica (Season 2016-17)

**AL-2010/D**  
Antarctic Logistics Division

Registration No.	NCAOR/ 36ISEA/
Date of Walk-In- Interview	<b>16-November- 2016</b>
Position Applied for Medical Officer (Tick mark the appropriate box)	Surgeon/Physician (for around 14 months)
Experience of Antarctic Expedition(s) (if any)	

Affix Recent Passport Size Photograph with White Background

1.	Name in full (in block letters)			
2.	Father's Name			
3.	(a) Date of Birth (Attested copy of proof of age to be attached)	Date	Month	Year
4.	Nationality			
5.	Permanent Address including Pin Code			
6.	Address for correspondence including Pin Code			
7.	Telephone Number (with STD Code)	Cell phone Number		
8.	Email address (CAPITAL LETTERS)			
9.	Nearest Railway station			

10. Educational Qualification (in chronological order from 10th Standard onwards)

<b>Courses Passed</b>	<b>University/ Institution/ Board</b>	<b>Year of Passing</b>	<b>Subject taken</b>	<b>Result with Division/Class</b>

11. Professional Training underwent:

<b>Organisation</b>	<b>Period</b>		<b>Details of Training</b>
	<b>From</b>	<b>To</b>	

12 Work Experience in chronological order, starting with the first job:-

<b>Name and address of employer/ institution</b>	<b>Designation of post held &amp; Nature of Work</b>	<b>Period</b>		<b>Total Experience</b>	
		<b>From</b>	<b>To</b>	<b>Year</b>	<b>Month</b>

**DETAILS OF ENCLOSURES**

1) Proof of Age
2) Educational Qualification
3) Professional Training Certificates
4) Work Experience
5) ID Card and Discharge Book (In case of Ex servicemen)

**Declaration**

I (Name).....hereby declare that,

- i. I am an Indian National
- ii. I have read the provisions given in the Advertisement
- iii. All the statement made and information given by me in this application are true complete and correct to the best of my knowledge and belief. In the event of any information or part of it being found false or incorrect or suppressed before or after the test /interview / medical examination or during the period of contract, action can be taken against me by NCAOR and my candidature/ appointment shall automatically stands cancelled/ repatriated/ terminated.
- iv. I further declare that I fulfil all the conditions of eligibility regarding age, educational, professional/ technical qualifications, etc., prescribed for the contractual post applied for as on last date of application.
- v. I understand and am fully aware that NCAOR has the right to select me for short or long term contractual appointment regardless of my preference depending on the requirements of the expedition and subject to clearance of my medical/ psychological examination and successful completion of pre-Antarctic Training.

Place:

Signature of the Candidate.....

Date:

Name: .....

(For use of the forwarding office)

Date.....

Place.....

Signature .....

Name of the forwarding officer.....

Designation.....

Office Stamp (seal)