

Aditya Jyot Eye Hospital Pvt. Ltd.

Plot No.: 153, Road No.: 9, Major Parmeshwaran Road, Opp. SIWS College Gate No.: 3 Wadala,
Mumbai – 400 031. Tel: 91-22-24177600, Fax: 91-22-24177630,
E-mail: researchajeh@gmail.com

Application Form for 18th Months Fellowship Program in Vitreo Retinal Surgery at the Aditya
Jyot Eye Hospital, Wadala, Mumbai

(Under the aegis of the Maharashtra University of Health Sciences)

Last Date for receipt of application forms- 19th April 2014, 17.00 hrs at

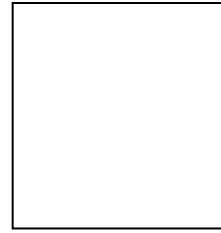
Aditya Jyot Eye Hospital Pvt Ltd.

Plot no 153, Road no. 9, Major Parmeshwaran Road,
Opp S.I.W.S college, Wadala west, Mumbai - 400031.

Contact - +91-22-24177632/00
www.adityajyoteyehospital.org

Download this form, print it, fill it completely and submit along with DD of Rs. 500/- at
mentioned above address.

APPLICATION FORM



Passport Size Photo

Applicant's Particulars

1. Name in full (begin with surname)

2. Present Address

3. Contact Details

Phone: _____

E mail: _____

4. Permanent Address

5. Date of Birth _____, Age _____

6. Marital Status Single/Married

7. Gender Male/Female

Professional Qualification and Experience

Educational Qualification:

Exam	Month & Year	Subject	University	Grade/Percentage

Work Experience

Miscellaneous

- a. Medals / Awards _____
- b. Conferences Attended _____
- c. Papers presented / published _____
- d. Any research work done _____
If so, give details _____

Languages _____

Family Information

- a) Name of Husband / Wife & Occupation _____
- b) Name of Children _____
- c) Father's Name & Occupation _____
- d) Mother's Name & Occupation _____

Future Plan

What is the aim in your life

What made you to apply for this fellowship

What made you to decide to be an Ophthalmologist

Hobbies

Professional Reference (Provide 3 Names & Addresses)

1.

2.

3.

Declaration

I hereby agree, that I will follow the rules and regulations at present in force or that may hereafter be made for the administration of the collage and its associated recognized hospitals and under take that so long as I am a fellow/certificate course student of the collage, I will do nothing unworthy of the student of that collage either inside or outside or anything that will interfere with its orderly working and discipline. I also declare that the information/particulars furnished above by me is true to the best of my knowledge. I know the consequences as provided in rules of MUHS as regards furnishing false information/concealing any information.

Date

Signature