ALL INDIA INSTITUTE OF MEDICAL SCIENCES, Bibinagar Hyderabad Metropolitan Region, Telangana

Department of Community Medicine and Family Medic First Floor, AllMS Bibinagar - 508126



(Please read the format carefully before fill. If format will be not fill clearly, form will be rejected)

	Name of the post	applied for:	PROJECT	ADMU	NISTRATIVE	OFFICER
	1. Name (In Capi	ital Letters) :		GOPAL	JEELA	
	2. Father's Name	:		THIPPA	NNA JEELA	
	3. (a) Date of Birt				9-1991	
	(b) Age in year (as	on 07 th Marcl	n, 2023): 29	.days05	Month31 Years	S
4.	Nationality	:		Ind	ian	
5.	Marital Status	:		MARRIE	E-D	
6.	Sex (Male/Female)) :		MALA		
7.	Category (Gen./OE	,				
8.	(a) Address (Permai	nent) :	H.NO: 3-	-22 ; (V)	UDMAL GID	009
					PARAYAMPET	
		TELP	NGANA	Pin C	ode 509 407	
	(b) Address for Com	munication	8-162 5	KRANT	HI NAGAR	
		N/K	COMMUNI	Ty the	III! KOTHAPE	1
					ode 500035	
9.	Contact Details	Residence	:			
		Office				

Mobile

E-Mail ID

9603558381 GOPALRGUZ @gmail. Com.

10 Please tick (✓) if you are a member of Scheduled Caste/Scheduled Tribe/OBC

(Answer Yes or No) Yes

If the answer is Yes, Provide Caste

Certificate	ч	es	

5 Particulars of all examinations passed and degree obtained (commencing with the Matriculation or equivalent examinations). Attach attested copies of all certificates.

Examination or Degree obtained	Subject taken	Year of Passing	Grade/ Percentage
×		2007	80%.
XII	B1.P.C	2009	68%
Graduation	13sc (BZC)	20016	594
The second secon			

7 Give particulars of Employments held in chronological order:-

	Name of employer	Date of joining	Date of leaving	Designation during employment	Salary (excluding allowances) last drawn & scale of pay
1>	S.R. Global Consultancy	July -14	MOV-16	Date, man	27,000/-
	services Hydrabad			Consultand	
2>	Friends (Inb (NGO) medak	Dec-16	June-22	M15 Cooradingu	30,000)-
37	Forum Educated and	July-22	tell and	IT, Data	35,000/-
	self emplyed -wocw , Da			Coordinate	

8. Details of Enclosures:

i. 38c meno ii. Anter meno iii. Degnee neus iv. Cast Gestificatie.

DECLARATION

I hereby declare that the entries in this form and the additional particulars, if any, furnished herewith are true to the best of my knowledge and belief.

Place: Hydrabad

Date: 20/05/2023

Signature of Candidate