



भारत सरकार/ GOVERNMENT OF INDIA
अटल बिहारी वाजपेयी आयुर्विज्ञान संस्थान एवं
डॉ. राम मनोहर लोहिया अस्पताल, नई दिल्ली-110001

ATAL BIHARI VAJPAYEE INSTITUTE OF MEDICAL SCIENCES &
DR. RAM MANOHAR LOHIA HOSPITAL NEW DELHI-110001



23404443/23365525
aliddarmlh2@gmail.com

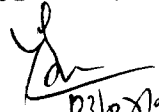
File No. : 17-1(25)/2013 RMLH (HA-I)/193
Dated: 06/07/2021

CIRCULAR

Applications are invited on the format as per annex.1 from the eligible candidates through their college for the internship in the Department of Laboratory, Dr Ram Manohar Lohia Hospital, New Delhi which will be started in July 2021. The application may be submitted personally in Hospital Administration – I Section, Room No. 18, Nursing Home, Dr. Ram Manohar Lohia Hospital, New Delhi on or before 10.07.2021 upto 4.30 PM. No application will be accepted by post.

The eligibility for the internship is B.Sc MLT/DMLT pursuing from a recognised institute which should be approved by AICTE. The date of application will be uploaded on the hospital website later on.

:- No application will be entertained after 10.07.2021 4.30 PM. The application submitted by the students of College / Institute which is not recognised by AICTE will be rejected.


(Pankaj Kumar Sinha)
Deputy Director (Admn.)

July 2021 Annexure-I

Application for the internship in the Department of Laboratory w.e.f. [redacted] in Dr. RML Hospital New Delhi.

1. Name of the Candidate.....
2. Father/Husband,s Name:.....
3. Date of Birth:-
4. Present Address:-
.....
.....
5. Mobile No & Email ID.....
6. Permanent Address:.....
.....
7. Nationality:-
8. Marital Status:-
9. Gender:-
10. Period.....

Paste here firmly your recent photograph (4cm x 5 cm)

(Do not staple. Do not get the photograph attested)

11. Details of educational & Technical Qualification

Qualifications	Year of Passing	Name of college with university	Percentage	Experience
10 th				
12 th				
MLT/DMLT				

I hereby declare that all statements made in this application are true, complete and correct to the best of my knowledge and belief.

Signature of candidate
(Only in running hand)

Place:-
Dated:-

Note:- Please Enclosed the following Documents.

1. College NOC, 2. 10th And 12th passing Certificate, 3. Copy of ID, 4. Copy of College Card