

MUNICIPAL MEDICAL STAFF SELECTION COMMITTEE

Document Scrutiny Form

1. Name of the Candidate
2. Post Applied
3. Date of Interview

Sr. No.	Reuired Document	Sumbmitted by Candidate		Remarks
		YES	NO	
1.	Birth Certificate			
2.	SSC Certificate			
3.	HSC Certificate			
4.	1 st , 2 nd & 3 rd MBBS Marksheet			
5.	1 st , 2 nd & 3 rd MBBS Passing Certificate			
6.	MBBS Degree Certificate			
7.	MMC / MCI Registration			
8.	M.D. / M.S. Passing Certificate			
9.	M.D. / M.S. Degree Certificate			
10.	Additional Qualification Such as DNB Degree Certificate & MMC / MCI Registration			
11.	D.M. / M.Ch. Passing Certificate			
12.	D.M. / M.Ch. Degree Certificate			
13.	Additional Super Speciality Qualification such as DNB			
14.	MMC / MCI Registration			
15.	UG / PG / Super Speciality MCI Recognition college certificate.			
16.	Experience Certificate in Prescribed Format			
17.	Caste Certificate			
18.	Caste Validity Certificate			
19.	Marathi Passing Certificate (S.S.C or H.S.C.)			
20.	M.S.C.I.T			
21.	NOC from Present working Institute			
22.	Adhar Card			
23.	Office Order Assistant Professor			
24.	Office Order Associate Professor			

Signature of Candidate

(Kindly bring this form along with above original documents at the time of interview)


(For Scrutiny Committee Use Only)

Dr.

is Eligible / Not Eligible for this Selection of

Associate Professor in

If Not Eligible Reason


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(L.T.M.M.C..)