



APPLICATION FORM FOR THE POSITION OF RESEARCH FELLOW

in the NIHR Global Health Research Centre for Improving Mental and Physical Health Together (IMPACT)

at Institute of Psychiatry, Rawalpindi Medical University

SECTION 1: PERSONAL PROFILE:

Title	Dr/Mr/Miss/Mrs
FIRST NAME	
MIDDLE & LAST NAME	
FATHER'S/ HUSBAND'S NAME	
GENDER	Male/Female
DATE OF BIRTH	Dd/Mm/Year
NATIONALITY	
PRESENT ADDRESS	House # Street # Town/City: Postal Code: Country:
PERMANENT ADDRESS	House # Street # Town/City: Postal Code: Country:
CONTACT NUMBERS	Mobile: Landline: Office:
E-MAIL ADDRESS	





SECTION 2: EDUCATIONAL QUALIFICATIONS

Please enter your academic qualifications in chronological order, starting with the most recent one first and former most in the end. You can add or delete rows accordingly.

SI	Degree/Certificate	Year	Institution	Major subjects
no				
1				
2				
3				
4				
5				

SECTION 3: OTHER QUALIFICATIONS Job-related trainings, courses, skills, honours, awards, and special accomplishments memberships in professional/honour societies, leadership activities, public speaking and performance awards You can add or delete rows accordingly. SECTION 4: PUBLICATIONS Please enter your publications in chronological order, starting with the most recent one first and former most in the end.

You can add or delete rows accordingly.





SECTION 5: WORK EXPERIENCE

Please enter your employment record in chronological order, starting with the current or most recent one first and former most in the end.

Job Title/ Position	Dates from/to (dd/mm/year)	EMPLOYER'S NAME, CONTACT DETAILS, E- MAIL & POSTAL ADDRESS	BRIEF DESCRIPTION OF YOUR DUTIES AND ACCOMPLISHMENTS	STARTING SALARY (PER ANUM)	ENDING SALARY (PER ANUM)	REASON FOR LEAVING

You can add or delete rows accordingly.





SECTION 6: REFERENCES

Please give details of any three references, which can include your present or former employer. If you have not been employed before then please use a former teacher/tutor/lecturer. They should include individuals able to comment on your skills and abilities and on your suitability for the post for which you have applied. Please note that referees may be contacted prior or after the interview.

FIRST REFEREE:				
FULL NAME:				
JOB TITLE/POSITION:				
ORGANIZATION/INSTITUTION:				
POSTAL				
ADDRESS:				
EMAIL ADDRESS:				
CONTACT NUMBERS: MOBILE OFFICE				
01116L				
SECOND REFEREE:				
FULL NAME:				
JOB TITLE/POSITION:				
ORGANIZATION/INSTITUTION:				
·				
POSTAL				
ADDRESS:				
EMAIL ADDRESS:				
CONTACT NUMBERS: MOBILE OFFICE				
THIRD REFEREE:				
FULL NAME:				
JOB TITLE/POSITION:				
ORGANIZATION/INSTITUTION:				
DOCTAL DOCTAL				
POSTAL				
ADDRESS:				
EMAIL ADDRESS:				
CONTACT NUMBERS: MOBILE OFFICE				





SECTION 7: ADDITIONAL INFORMATION

position that you are	to support your applicate applying for and reason	tion including details on think you think you a	of your past and prese are suitable for the po	nt experience relevant sition (maximum 500 v	t to the words)
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, , , , , , , , , , , , , , , , , , , ,	





SECTION 8: APPLICANT'S DECLARATION

I understand that an appointment, if offered, will be on the condition that the information I have provided on this application form is correct. And I fully understand that falsification of any information can lead to my dismissal, if appointed.

Signed: _	 	 	
Date:			

