

NAME OF THE COLLEGE : PONDICHERRY INSTITUTE OF MEDICAL SCIENCES

DECLARATION FORM : 2018-19 – RESIDENT (SR/JR)

(Note : It is responsibility of Dean, HOD & resident to submit only the declaration form of resident, who has not appeared for assessment in any other college during academic year and working as full time)



- 1.(a) Name : **Dr. Nirmala Peter**
- 1.(b) Date of Birth & Age : **31.03.1957, & 60 years**
- 1.(c) Submit Photo ID proof issued by Govt. Authorities :
Photo ID submitted :

Passport copy / **PAN Card** / Voter ID/Aadhar Card.

Number XXXXXXXXXX Issued by Govt. of India

Note: 1) Without Photo ID, Declaration form will be rejected and will not be considered as teaching faculty. 2) Original Certificates are mandatory for verification. All Certificates/Documents/Certified Translations, must be in English

- 1.(d) i. Present Designation : **Senior Resident**
- 1.(d)ii. Department : **OBG**
- 1.(d) iii. College : **Pondicherry Institute of Medical Sciences**
- 1.(d)iv. City : **Pondicherry**
- 1.(d)v. Date of appearance in Last MCI - **UG/PG/Any Other Assessment 21-08-2017_** in which college **Pondicherry Institute of Medical Sciences**
- 1.(d)vi Whether appeared and accepted in Last MCI - **UG/PG** Assessment in the same Institute - Yes/No
- 1.(d)vii Whether appeared and accepted in Last MCI - **UG/PG** Assessment on same Designation - Yes/No
- 1.(e)i. Campus / Present address of Resident:
Room No.301,
Hospital Annexe,
PIMS Campus, Pondicherry

Designation	Department	Name of Institution	From DD/MM/YY	To DD/MM/YY	Total Experience in years & months
Junior Resident 1	OBG	Madurai Medical College	1982	1984	2 years
Junior Resident 2	OBG	Dr. SMCSI Medical College, Karakonam, Trivandrum, Kerala	18/04/2005	18/04/2006	1 year
Senior Resident 1	OBG	Dr. SMCSI Medical College, Karakonam, Trivandrum, Kerala	19/04/2006	10/12/2015	9 years 7 ½ months
Senior Resident 2	OBG	Pondicherry Institute of Medical Sciences	21/12/2015	Till date	

- 4.(a) Before joining present institution I was working at Dr. SMCSI Medical College as Senior Resident and relieved on 10/12/2015 after resigning /Transferring /(**Relieving order is enclosed from the previous institution**).
5. I have drawn total stipend from this college in the current financial year as under.

Month	Amount Received
September 2016	75000
October 2016	75000
November 2016	75000
December 2016	75000
January 2017	75000
February 2017	75000
March 2017	75000
April 2017	75000
May 2017	75000
June 2017	75000
July 2017	75000
August 2017	75000

DECLARATION

1. I, Dr. Nirmala Peter am working as Senior Resident in the Department of OBG at Pondicherry Institute of Medical Sciences Medical College and do hereby give an