

**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. Priyan Voltaire**
- 1.(b) Date of Birth & Age : **07-11-1989, 27 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 : **Radio diagnosis**
- 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 : 310,  
Hospital Annexe,  
PIMS Kalapet, Pondicherry -605014

3. Details of the teaching experience till date.

Designation	Department	Name of Institution	From DD/MM/YY	To DD/MM/YY	Total Experience in years & months
Junior Resident 1	<b>Radio diagnosis</b>	Indira Gandhi Govt. General Hospital & Postgraduate Institute	07-10-2013	08-10-2016	3 years
Junior Resident 2					
Junior Resident 3					
Senior Resident	<b>Radio diagnosis</b>	Pondicherry Institute of Medical Sciences	02-01-2017	Till date	

4 .(a ) Before joining present institution I was working at \_ Indira Gandhi Govt. General Hospital & Postgraduate Institute as Junior Resident and relieved on \_08-10-2016 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	
October 2016	
November 2016	
December 2016	
January 2017	125000
February 2017	125000
March 2017	125000
April 2017	125000
May 2017	125000
June 2017	125000
July 2017	125000
August 2017	125000

#### DECLARATION

1. I, **Dr. \_Priyan Voltaire\_** am working as **\_\_Senior Resident** in the Department of **Radiology at Pondicherry Institute of Medical Sciences** Medical College and do hereby give an undertaking that I am a Full time Regular Resident in Radiology, and am staying in Room No. 310 in the Residents' Hostel in the college premises.