<u>Check List – post of Medical Physicist (Advert. I-82/A-B/Rectt/2022-23; Exam conducted 27.4.2023)</u>

PART A. APPLICANT DETAILS - <u>To be filled by Applicant in CLEAR HANDWRITING, ONLY AS PER</u>

<u>APPLICATION FORM)</u> - (Strike out what is not applicable and Circle) what is applicable)

Name of Applicant (as per application) (IN CAPITALS)			Gender			
		Dat	te of birth (dd/mm/yyyy) (as per 10 th class			
			tificate)			
Address (for communication – as per	application)		Roll No			
The continue of the continue o	аррисацену					
		Cat	regory applied - UR / OBC / SC			
Phone no. (as per application)			Post Applied – Medical Physicist – Radiotherapy			
		an	d Radiodiagnosis <u>OR</u> Nuclear Medicine			
			rike out if not applicable)			
Email (as per application):						
Declaration by applicant - I hereby	Signature of Candid	date	Photograph of Candidate to be pasted here			
solemnly declare that Information	(as per the applica	tion	(recent;45x35mm; good quality)			
and Documents submitted by me	form)-					
before Document verification						
committee are true and nothing has						
been concealed. Further I hereby						
acknowledge that if I submit or						
produce any false document and it is						
discovered subsequently then my						
appointment may be cancelled						
without any intimation, and I shall						
be liable under the applicable law for						
the time being in force.						

PART B. BIOMETRIC VERIFICATION - (To be filled by TCS official)

Biometric verified (Yes/No)	Signature of Official

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PART C. <u>TO BE FILLED BY DOCUMENT VERIFICATION COMMITTEE</u> as per Documents submitted by Candidate and status of verification from Originals as well as concerned website, as per <u>Advert. I-82/A-B/Rectt/2022-23</u>

S No.	Particulars			Category	Copy of certificate in file (Yes/ No/ NA)	Verified from Original/ Website (Yes/No)
1	Biometric (D	one or Not done)		For all		
2	10th class M	arks sheet/ Certificate f	for D.O.B.	For all		
3	12th class M	ark Sheet/ Certificate		For all		
4	Essential Qualif. & Exp. (cut off date 1.1.2023)			For all		
4(a)	Postgraduate degree in Physics from a recognized University; <u>AND</u> a Post M.Sc diploma in Radiological/Medical Physics from a recognized University					
4(b)	Basic degree in Science from a recognized university, with physics as one of the main subjects; <u>AND</u> a Post graduate degree in Radiological / Medical physics from a recognized university;					
4(c)	• 1					
4(d)						
4(e)	Approval from AERB to function as Radiological Safety Officer.					
8	SC/OBC Certificate on prescribed format of UP Govt.			SC/OBC of UP State only		
10	Domicile of U.P. / Aadhaar certificate			All categories	(To be deposited in File) (Yes/No)	
11	Character certificate -1 (Issued by Gazetted officer or Head/ principle of Institute)		All categories	(To be deposited in File) (Yes/No)		
12	Character certificate -2 (Issued by Gazetted officer or Head/ principle of Institute)		All categories	(To be deposited in File) (Yes/No)		
13	Declaration -1 (Rs 100 non-judicial stamp paper)		All categories	(To be deposited in File) (Yes/No)		
14	Declaration-	2 (Rs 100 non-judicial st	tamp paper)	All categories	(To be deposited in File) (Yes/No)	
pro	Document produced by candidate have been VERIFIED (YES/NO) Signatures of DV Committee (at least 2 members & Chairperson should sign each CheckList) 1.(Name) 2.(Name)		1	1.(Signature)		
				2.(Signature)		

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IF NOT VERIFIED — Record reasons	1. – 2. – 3. –	
Chairperson (DV committee)	(Name)	(Signature)