

Annexure-III

NATIONAL INSTITUTE OF TECHNOLOGY KARNATAKA, SURATHKAL

**CHECK LIST FOR ORIGINAL DOCUMENT VERIFICATION FOR ATTENDING
INTERVIEW FOR MEDICAL OFFICER**

[The applicant has to bring original documents as applicable mentioned in Sl No. 5 to 15 for verification and one set copy for submission. Mention “NA” for not applicable items.]

To be Filled by Candidate		
Sl. No	Items	Details
1	Application Registration Number :	
2	Name of the Candidate as in Application form (in CAPITAL) :	
3	Father's Name :	
4	Date of Birth (dd/mm/yy)	
5	Aadhar No.	
6	Class X Mark Sheet No. (For Date of Birth Verification)	
7	Category (Note: This post is Unreserved Hence this certificate is not for appointment, only for record purpose)	<div style="display: flex; justify-content: space-around; align-items: flex-start;"><div style="text-align: center;"><input type="checkbox"/> GEN</div><div style="text-align: center;"><input type="checkbox"/> SC</div><div style="text-align: center;"><input type="checkbox"/> ST</div><div style="text-align: center;"><input type="checkbox"/> OBC-NCL</div><div style="text-align: center;"><input type="checkbox"/> EWS</div><div style="text-align: center;"><input type="checkbox"/> PWD</div></div>
	Certificate No. & Date of issue (OBC-NCL and EWS Certificate issued on or after 01-04-2024)	
8	PWD Certificate with Type of Disability and Percentage of Disability [No & Date of issue]	<div style="text-align: center;"><input type="checkbox"/> PWD</div>
9	Central Govt. Service/ Ex- Serviceman Certificate No. & date of issue	

Date:

Signature of the Candidate

[P.T.O]

To be Filled by Candidate					
10	Name of Qualifying Degree as per Recruitment Rules				
	Degree Certificate No.				
	Field/Branch/Specialisation	Year of passing	% marks/CGPA		
11	State or Indian Medical Council Registration Number				
	Name of the State Medical Council				
	Registration Number and Date				
12	Experience Certificate (For Government Employees Only)				
	Certificate No	Name of Employer	Pay Scale and Grade Pay / Pay Level / Pay Band	Period of Employment	Duration in Years, Months and days
13	NOC Number, Date of Issue (For Government Employees Only) (Date of Issue has to be after 07-01-2025)				
	Name of Employer issued NOC (For Government Employees Only)				
14	Vigilance Certificate Number, Date of Issue (Date of Issue has to be after 07-01-2025) (For Government Employees Only)				
	Name of the Authority issued Vigilance Certificate (For Government Employees Only)				
15	Additional Qualifications, if any				

Date:

Signature of the Candidate

