

**HOSPITAL BASED CANCER REGISTRY & PATTERN OF CARE
SURVIVAL STUDIES**

Hall Ticket for written examination to the post of
SCIENTIST-B (MEDICAL) – 1 NO. (Contract Basis)
Under NCRP-ICMR–HBCR & POCSS



Name of the Post :

Name of the Candidate:

Roll No:

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Date of Birth:

Age & Sex:

Address:

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Paste your Passport
Size Photograph
attested with
gazette officer

Contact Number:

Signature of the Candidate

Signature of the Invigilator

Office Copy



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