

Dr. XXXXXXX

S/O- Dr. XXXXX
XXXXXX, Odisha
Contact No.- XXXXXXXXX
(Home) XXXXXXXXX
Email: XXXX@gmail.com



OBJECTIVE :

To better facilitate student learning in the area of Medical Science and obtain a challenging position in a medical setting that will allow me to gain experience working with a diverse and challenging population of patients .

ACADEMIC QUALIFICATION :

| Qualification | Institution | University/ Board | Year of Passing | Division | Attempt |
|------------------|--------------------------------------|-------------------------|--------------------|----------|---------|
| DM CARDIOLOGY | SCB Medical College, Cuttack | Utkal University | 2014 | - | 1st |
| MD Medicine | MKCG MC, Berhampur | Berhampur University | 2010 | - | 1st |
| MBBS | MKCG MC, Berhampur | Berhampur University | 2005 | 1st | 1st |
| CHSE | S.K.C.G.College, Pralakhemundi | CHSE,Orissa | 1997 | 1st | 1st |
| HSE | M.R.B.H. School, Pralakhemundi | HSC, Orissa | 1995 | 1st | 1st |

HOBBIES & SOCIAL WORKS :

- Reading Newspaper
- Making new friends
- Playing Cricket

PERSONAL STRENGTH :

- Confidence
- Hard Working

PERSONAL DETAILS :

Father's Name : Dr. XXXXX
Date of Birth : 25th May 1981
Sex : Male
Religion : Hindu
Nationality : Indian
Marital Status : Married
Language Known : English, Hindi, Odia & Telugu
Permanent Address : XXXXX Paralakhemundi
Contact No.- XXXXXX
(H) XXXXX
Qualification of Spouse : MBBS, MD (O &G)

DECLARATION

I XXXXX, hereby declare that all the statements made in the resume are true and correct to the best of my knowledge and belief. Therefore, I request to be kind hearted and offer to do my need future in your organization. I shall remain ever grateful to you and oblige .

Date :

Place :

Dr. XXXXXX