



CHALLAN

CANDIDATE COPY

**SICKLE CELL INSTITUTE CHHATTISGARH,
GENETIC LAB, DEPTT. OF BIOCHEMISTRY,
PT.JNM MEDICAL COLLEGE, RAIPUR**

To be deposited in State Bank of India **Power**
Jyoti A/c. No. 33599761355
IFSC Code - SBIN0000461

Date.....

Post applied for

Name of Applicant

.....

Category- Unreserved/ST/SC/OBC

Amount to be deposited as application fee -
Rs.

Bank Charges if any to be deposited separately.

Signature of Depositor

Branch Name

Amount deposited

Bank's Seal & Authorized Signature



CHALLAN

SCIC COPY

**SICKLE CELL INSTITUTE CHHATTISGARH,
GENETIC LAB, DEPTT. OF BIOCHEMISTRY,
PT.JNM MEDICAL COLLEGE, RAIPUR**

To be deposited in State Bank of India **Power**
Jyoti A/c. No. 33599761355
IFSC Code - SBIN0000461

Date.....

Post applied for

Name of Applicant

.....

Category- Unreserved/ST/SC/OBC

Amount to be deposited as application fee -
Rs.

Bank Charges if any to be deposited separately.

Signature of Depositor

Branch Name

Amount deposited

Bank's Seal & Authorized Signature



CHALLAN

BANK COPY

**SICKLE CELL INSTITUTE CHHATTISGARH,
GENETIC LAB, DEPTT. OF BIOCHEMISTRY,
PT.JNM MEDICAL COLLEGE, RAIPUR**

To be deposited in State Bank of India **Power**
Jyoti A/c. No. 33599761355
IFSC Code - SBIN0000461

Date.....

Post applied for

Name of Applicant

.....

Category- Unreserved/ST/SC/OBC

Amount to be deposited as application fee -
Rs.

Bank Charges if any to be deposited separately.

Signature of Depositor

Branch Name

Amount deposited

Bank's Seal & Authorized Signature