

1) NEW REGISTRATION :

- For New Registration click on New Registration Menu
- Select **Advertisement number, Post Applied For and Belongs to Category**
- All the **field are mandatory to fill for New Registration / New Application.**



TATA MEMORIAL CENTRE

टाटा स्मारक केंद्र

A Grant-in-Aid Institution Under Department of Atomic Energy Govt. of India

प ऊ वि भारत सरकार का एक सहायता अनुदान प्राप्त संसाधन

(Only For Temporary Positions)



[Instructions](#) [New Registration](#) [Login](#) [Forgot Password](#) [Search Application](#) [Help Desk](#)

NEW REGISTRATION

Important Instructions :

New Applicants Please Fill following Information to generate application number.

Note: All fields are mandatory to fill.

1) Incomplete & wrongly filled application will not be accepted.

Screen to Check Eligibility

Application No:(Note down System Generated No. After Registration):

Select Advt No:

Post Applied For:

You Belongs to :

Last Date of Application:

Age as on Advt. Last Date:

Personal Information

Title:

Middle Name:

Date of Birth:

Mobile No :

Nationality :

First Name :

Last Name:

Gender:

Email ID :

Password :

Confirm Password :

Pancard Number :

Verification Code :



Verification Code :

REGISTER

CLEAR

➤ After Successful Registration you will receive email with credentials

TMC - Temporary Post Online Registration Details Inbox x



TMC - Tata Memorial Centre

to me ▾

19:40 (0 minutes ago)



Dear K RATHOD

Application Number : T/TEST/CONT/2022/43346

Password : Kailas@123

Date & Time : 04-11-2022 19:40:32

You have successfully completed your Primary registration of the online application process in TMC (Tata Memorial Centre)

To complete the remaining stages of the application process, you will require to login in to the online application module and pay the application fee (if applicable).

Click here to login : https://tmc.gov.in/Temp/frm_Login.aspx

All the information pertaining to this recruitment will be available on the website and further correspondence will be undertaken through Email only.

Kindly note that, in case of submission of incorrect information or suppression of facts, your candidature is liable to be rejected at any stage.

H.R.D OFFICER
TATA MEMORIAL HOSPITAL

Note: This is a system generated mail. Please don't reply.

2) LOGIN PAGE :

➤ Login with Application Number and Password to complete the form.



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🏠 Instructions👤 New Registration👤 Login👁️ Forgot Password🔍 Search Application🗉 Help Desk

LOGIN

Login Here

Application Number :

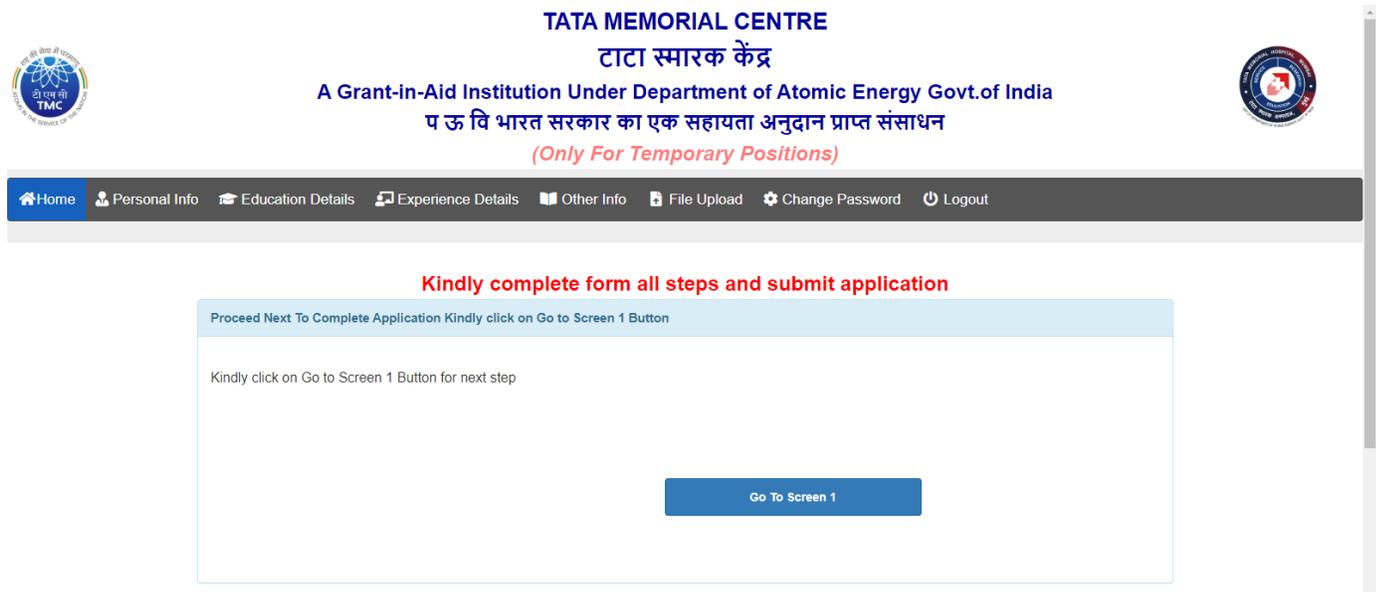
Password :

LOGIN

[Forgot Your Password ? Click Here](#)

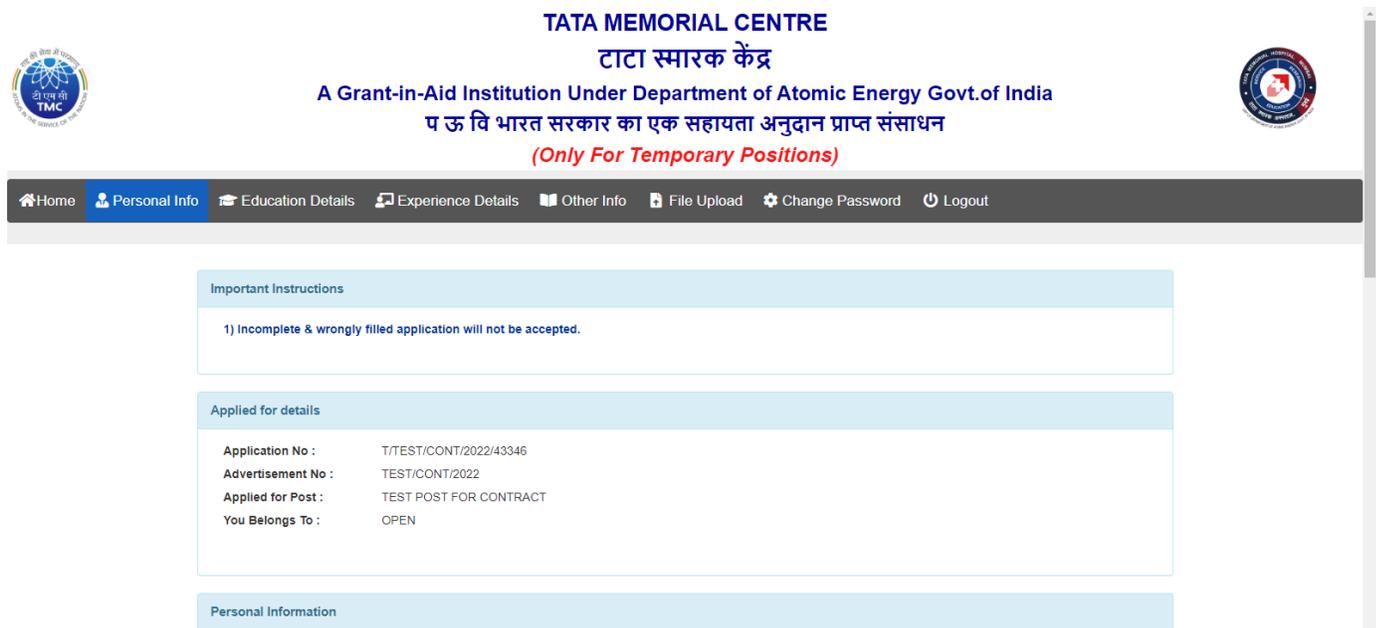
3) HOME PAGE :

- You have to click on **Go To Screen 1 Button** to complete the form step1



4) PERSONAL INFORMATION PAGE :

- Here you will get your personal information details.
- You can **modify the details by clicking on update button** as below.
- Click next button to proceed **next screen**



| Applied for details | |
|---------------------|------------------------|
| Application No : | T/TEST/CONT/2022/43346 |
| Advertisement No : | TEST/CONT/2022 |
| Applied for Post : | TEST POST FOR CONTRACT |
| You Belongs To : | OPEN |

Title: Mr.

Middle Name: V

Date of Birth: 02-02-1998

Present Address : PRESENT ADDRESS

Present Pincode : 410209

Permanent City : PERMANENT CITY

Mobile No : 1234567898

Pancard Number : AKDHF9845F

First Name : K

Last Name: RATHOD

Gender: Male

Present City : PRESENT CITY

Permanent Address : PERMANENT ADDRESS

Permanent Pincode : 410209

Email ID : kailasrathod408@gmail.com

Nationality : India

State or Union Territories: Maharashtra

5) EDUCATIONAL DETAILS PAGE

- You have to add at least one education details go proceed next step
- Click next button to go to next screen



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Important Instructions

1) Incomplete & wrongly filled application will not be accepted.

Educational / Qualificational Details (including academic ,Diploma,courses and other relevant qualifications)

Degree: Select Degree

Subject: Enter Subject

University : Enter University Name

Course Type : Select Course Type

Passing Month : Select Month

Percentage : Enter Percentage

If Other : Enter Degree Name If Other

Institution/ College: Enter Institution/ College Name

Duration of Course (if course): Enter Course Duration

Result awaited : NO

Passing Year : Enter Passing Year

Certificate Enclosed : NO

| Action | Edit Records | Sr.No | Degree | Subject | Institute/college | University | Duration of Course | Course Type | Year/Month | Percentage | Result Awaited | Certificate Enclosed |
|---------------------------------------|-------------------------------------|-------|--------|---------|-------------------|------------|--------------------|----------------|------------|------------|----------------|----------------------|
| <input type="button" value="Remove"/> | <input type="button" value="Edit"/> | 1 | TEST | test | TEST | TEST | 2 | CORRESPONDENCE | JAN2020 | 60.00 | N | N |

- To modify the details click on **EDIT** button and change details and click on **UPDATE**

Educational / Qualificational Details (including academic ,Diploma,courses and other relevant qualifications)

Degree:

Subject:

University :

Course Type :

Passing Month :

Percentage :

If Other :

Institution/ College:

Duration of Course (if course):

Result awaited :

Passing Year :

Certificate Enclosed :

[Add Qualification](#)

| Action | Edit Records | Sr.No | Degree | Subject | Institute/college | University | Duration of Course | Course |
|------------------------|--|-------|--------|---------|-------------------|------------|--------------------|--------|
| Remove | Update Cancel | 1 | TEST | test | TEST | TEST | 2 | CORRE |

6) PROFESSIONAL EXPERIENCE: (Training period will not counted as Experience)

- You have to **add at least one experience details to proceed next**
- Click next button to go to next screen

Professional Experience (Training period will not counted as Experience)

Post : Institute / Organization / Company:

Salary / G.P / PAY : Nature of work :

From Date : To Date :

Select Experience Type : Whether Applicant is in service of Govt/ Semi.Govt/ PSU/ Private :

Certificate Enclosed : Whether current experience :

Year : Month :

| Action | Edit Records | Sr.No | Post | Company | Nature of work | Salary | From Date | To Date | Total Year | Total Month | Experience Type | Service Type | Certificate Enclosed | Current Experience |
|---------------------------------------|-------------------------------------|-------|------|---------|----------------|--------|------------|------------|------------|-------------|-----------------|--------------|----------------------|--------------------|
| <input type="button" value="Remove"/> | <input type="button" value="Edit"/> | 1 | TEST | TEST | TEST | 0 | 01-01-2020 | 01-01-2022 | | | Teaching | Govt. | Y | N |

Total Experience : 2 Years, 0 Month, 0 Day

- To modify the Experience Details click on **EDIT** button and change details and click on **UPDATE**

Professional Experience (Training period will not counted as Experience)

Post : Institute / Organization / Company:

Salary / G.P / PAY : Nature of work :

From Date : To Date :

Select Experience Type : Whether Applicant is in service of Govt/ Semi.Govt/ PSU/ Private :

Certificate Enclosed : Whether current experience :

Year : Month :

| Action | Edit Records | Sr.No | Post | Company | Nature of work | Salary | From Date | To Date | Total Year |
|---------------------------------------|---------------------------------------|-------|-----------------------------------|-----------------------------------|-----------------------------------|--------------------------------|---------------------------------------|---------------------------------------|------------|
| <input type="button" value="Remove"/> | <input type="button" value="Update"/> | 1 | <input type="text" value="TEST"/> | <input type="text" value="TEST"/> | <input type="text" value="TEST"/> | <input type="text" value="0"/> | <input type="text" value="01/01/20"/> | <input type="text" value="01/01/20"/> | |

Total Experience : 2 Years, 0 Month, 0 Day

7) OTHER INFORMATION PAGE :

- Add Medical Council Registration details **if Applicable**
- If any other information you wish to add you have to mention here.
- Click on next button to go next screen.

Medical Council Registration Details

Registration Category : (if applicable) If other Registration Category:

Registration Number :

Current Employment Details

Whether Proof for Current Employment Attached:

Whether Applicant is in service of Govt./ Semi.Govt./ PSU:

Whether application is routed through proper channel : (If YES, Submission of No Objection Certificate from Head of the institution is Mandatory)

Notice require for joining the post(MENTION NO.OF DAYS E.G 10 DAYS,1 MONTH ETC) :

Particular's about Pension/ Provident Fund. etc. :

8) UPLOAD FILE (Photo, Signature, Educational Certificate, Experience Certificate)

Instructions To Upload (Photo ,Signature & All Relevant Documents)

Note: Files to be uploaded - mandatory for all applicants.

- 1) Your face should occupy about 75% of the total photo area.
- 2) The photos should be less than six month old.If you are wearing glasses, please make sure that reflection from the lenses do on limit the visibility of your eyes.
- 3) Size of Photo (Maximum Size 50 KB) & Signature (Maximum Size 20 KB).
- 4) Upload Recent colour photo (Height 200px & Width 200px) & Signature (Height 120px & Width 400px) .
- 5) Upload Educational / Qualification Certificate (Combined One PDF File of all certificate Which you have filled in application) in PDF Format (Maximum Size 5 MB) .
- 6) If Experience is asked Upload Experience Certificate (Combined One PDF File of all Experience Certificate Which you have filled in application) in PDF Format (Maximum Size 5 MB) .

File Upload (Photo ,Signature & All Relevant Documents)

Experience Certificate Uploaded Successfully

| | |
|---|---|
| Choose Photo : <input type="button" value="Choose File"/> No file chosen | <input type="button" value="Upload Photo"/> |
| Choose Signature : <input type="button" value="Choose File"/> No file chosen | <input type="button" value="Upload Signature"/> |
| Choose Qualification Certificate : <input type="button" value="Choose File"/> No file chosen | <input type="button" value="Upload Qualification Certificate"/> |
| Choose Experience Certificate : <input type="button" value="Choose File"/> No file chosen | <input type="button" value="Upload Experience Certificate"/> |

| Action | SrNo | File Type | File Name | Image |
|------------------------|------|-----------|---------------------------|---|
| Remove | 1 | P | Photo |  |
| Remove | 2 | S | Signature |  |
| Remove | 3 | Q | Qualification Certificate | Click Here To View Document |
| Remove | 4 | E | Experience Certificate | Click Here To View Document |



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[Home](#) [Personal Info](#) [Education Details](#) [Experience Details](#) [Other Info](#) [File Upload](#) [Change Password](#) [Logout](#)

Preview your application, Make sure that all details are correct, After Submission not allowed to Modify any Details. Please Go Down and Click on Submit Online Application Button for Final Submission.

APPLICATION NOT SUBMITTED (PLEASE FINAL SUBMIT)

| | | |
|-----------------------------------|------------------------------|---|
| Application No | : T/TEST/CONT/2022/43346 |  |
| Advertisement No | : TEST/CONT/2022 | |
| Post Applied For | : TEST POST FOR CONTRACT | |
| You Belongs To | : OPEN | |
| Name | : Mr. K V RATHOD | |
| Date Of Birth | : 02-02-1998 | |
| Age as on Advertisement Last Date | : 24 Years 10 Months 23 Days | |
| Gender | : M | |
| Nationality | : India | |
| Present Address | : PRESENT ADDRESS | |
| City | : PRESENT CITY | |
| Pin code | : 410209 | |
| State | : Maharashtra | |
| Mobile No | : 1234567898 | |
| Email | : kailasrathod408@gmail.com | |
| Permanent Address | : PERMANENT ADDRESS | |
| City | : PERMANENT CITY | |
| Pincode | : 410209 | |
| Pancard No | : AKDHF9845F | |

9) APPLICATION PREVIEW AND SUBMIT

- You have to preview your Online Application Form, All Details with Attachment are correctly attached or not.
- After Submit Final Online Application you are not allowed to modify any details, Before Submitting make sure that all details are correct.
- After Checking All details **you have to go Down, Check the declaration checkbox and Click on Submit Online Application Button to Submit your Online Application**

Important Instructions

Incomplete forms will be rejected.
Please fill up all items in the application form, attach relevant documents and certificates and sign the declaration.
All certificate copies will be verified with the originals at the time of interview
Suppression of any information will lead to termination of service without any intimation
Any doubts regarding the post / form may be clarified by emailing to : as mentioned in advertisement copy

Preview Application & Declaration

I hereby declare that all the information and particulars given by me in this application are true and correct to the best of my knowledge. I am aware that if any of the above statements are found to be incorrect or false or may material information or particulars of relevance have been misstated, suppressed or omitted, I am liable to be disqualified for appointment and if selected, my appointment will be liable to be terminated.

Final Submit Online Application

Go To Screen 1

➤ After Final Submitting the Online Application, You will get the message Application Submitted.



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Application Submitted Successfully, Please take application print out for your future reference

Personal Information

APPLICATION SUBMITTED

| | |
|-----------------------------------|------------------------------|
| Application No | : T/TEST/CONT/2022/43346 |
| Advertisement No | : TEST/CONT/2022 |
| Post Applied For | : TEST POST FOR CONTRACT |
| You Belongs To | : OPEN |
| Name | : Mr. K V RATHOD |
| Date Of Birth | : 02-02-1998 |
| Age as on Advertisement Last Date | : 24 Years 10 Months 23 Days |
| Gender | : M |
| Nationality | : India |
| Present Address | : PRESENT ADDRESS |
| City | : PRESENT CITY |



- After Final Submission you will get the **download bottom** of application

Download Application

I hereby declare that all the information and particulars given by me in this application are true and correct to the best of my knowledge. I am aware that if any of the above statements are found to be incorrect or false or may material information or particulars of relevance have been misstated, suppressed or omitted, I am liable to be disqualified for appointment and if selected, my appointment will be liable to be terminated.

SIGNATURE
Applicant's Signature

[Print / Download Online Application Form](#)

10) FINAL SUBMISSION EMAIL TO CANDIDATE

TMC - Online Application Final Submission Inbox x

TMC - Tata Memorial Centre to me 19:50 (0 minutes ago) ☆ ↶

Dear Mr. K V RATHOD

You have successfully submitted your online application with Application No : T/TEST/CONT/2022/43346

Please take the printout of your online application, and Keep with you for future reference.

Click here to login : https://tmc.gov.in/Temp/frm_Login.aspx

Date & Time : 04-11-2022 19:50:09

Note: This is a system generated mail.Please don't reply.

11) FORGOT PASSWORD

- In case you forgot your password
- Enter application number and click on send OTP button
- You will receive OTP on registered email ID
- After OTP validation you can change password

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Instructions New Registration Login **Forgot Password** Search Application Help Desk

FORGOT PASSWORD

Password Recovery

Application Number :

[SEND OTP](#)

12) SEARCH APPLICATION :

- In case you forgot your **application number** or **Credentials not received in mail**
- Enter the **Registered Email id** and search application
- You will get the application numbers which are registered with your email id



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InstructionsNew RegistrationLoginForgot PasswordSearch ApplicationHelp Desk

FIND APPLICATION NUMBER

Application Recovery

Email :

SEARCH
CLEAR

13) CONTACT US :

- In case of any query administrative or technical, visit the Help Desk.



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InstructionsNew RegistrationLoginForgot PasswordSearch ApplicationHelp Desk

CONTACT US

ADMINISTRATIVE HELP DESK (PROJECTUAL POSTS)

Project Department
Email : hrdproject@tmc.gov.in
Tel : +91-22- 24177000 (Extension. 4666)

Please Contact Between 09:30 A.M to 05:30 P.M

ADMINISTRATIVE HELP DESK (CONTRACTUAL / TEMPORARY POST)

Outsourcing Department
Email : hrdoutsourcing@tmc.gov.in
Tel : +91-22- 24177000 (Extension. 4674)

Please Contact Between 09:30 A.M to 05:30 P.M

TECHNICAL HELP DESK (SOFTWARE DEVELOPER)

Name : Mr.Kailas Rathod
Email : kailasrathod408@gmail.com
Tel : +91-22- 24177000 (Extension. 4675)

Please Contact Between 09:30 A.M to 05:30 P.M