



REGIONAL INSTITUTE OF MEDICAL SCIENCES,
(An Autonomous Institute under the Ministry of Health & Family Welfare, Govt. of India)
IMPHAL : MANIPUR - 795004.

TENDER FORM

1. Name of the applicant :
(in Block Letter)
2. Father's name :
3. Address :
4. Age :
5. Educational Qualification :
6. Experience in the field :
(Give details supported
by documents)
7. Detail of License :
8. Money receipt :
9. Earnest Money :
10. Description of the work : Providing the following items in the Canteen.

Handwritten signature