



ರಾಯಚೂರು ವೈದ್ಯಕೀಯ ವಿಜ್ಞಾನಗಳ ಸಂಸ್ಥೆ, ರಾಯಚೂರು

Raichur Institute of Medical Sciences, Raichur

(ಸರ್ಕಾರದ ಸ್ವಾಯತ್ತ ಸಂಸ್ಥೆ)

(Govt. Autonomous Institution)

ಹೈದ್ರಾಬಾದ್ ರಸ್ತೆ, ರಾಯಚೂರು

Hyderabad Road, Raichur

www.rims-raichur.cominfo@rims-raichur.com

Phone/Fax : 08532 238488/89

ಸಂ.ರಿಮ್ಸ್/ಸಿಬ್ಬಂದಿ(2)/ನೇಮಕಾತಿ/2023-24/ 225

ದಿನಾಂಕ : 28.06.2023

ನೇಮಕಾತಿ ಅಧಿಸೂಚನೆ

ರಾಯಚೂರು ವೈದ್ಯಕೀಯ ವಿಜ್ಞಾನಗಳ ಸಂಸ್ಥೆಯ ಬಹು ವಿಭಾಗೀಯ ಸಂಶೋಧನಾ ಘಟಕ (Multi Research Unit) ಹಾಗೂ Training of In-service Clinicians, ರಾಯಚೂರು ಇಲ್ಲಿ ಖಾಲಿ ಇರುವ ಈ ಕೆಳಕಂಡ ಹುದ್ದೆಗಳ ಭರ್ತಿಗಾಗಿ ಅರ್ಹ ಅಭ್ಯರ್ಥಿಗಳಿಂದ ಅರ್ಜಿ ಆಹ್ವಾನಿಸಲಾಗಿದೆ.

ಕ್ರ. ಸಂ.	ಹುದ್ದೆಗಳ ವಿವರ	ಹುದ್ದೆಗಳ ಸಂಖ್ಯೆ	ವೇತನ
1	ರೀಸರ್ಚ್ ಸ್ಟಂಟಿಸ್ಟ್ - II	01	ರೂ. 67,000/ +HRA ಪ್ರತಿ ಮಾಹೆ (ಸಂಚಿತ) (ವಯಸ್ಸು : ಗರಿಷ್ಠ 40)
2	ರೀಸರ್ಚ್ ಸ್ಟಂಟಿಸ್ಟ್ - I	01	ರೂ. 56,000/ +HRA ಪ್ರತಿ ಮಾಹೆ (ಸಂಚಿತ) (ವಯಸ್ಸು : ಗರಿಷ್ಠ 35)
3	ಪ್ರಯೋಗಶಾಲಾ ತಂತ್ರಜ್ಞರು	02	ರೂ. 20,000/ + HRA ಪ್ರತಿ ಮಾಹೆ (ಸಂಚಿತ) (ವಯಸ್ಸು : ಗರಿಷ್ಠ 30)
4	ಪ್ರಯೋಗಶಾಲಾ ಸಹಾಯಕರು / ಡಾಟಾ ಎಂಟ್ರಿ ಆಪರೇಟರ್	01	ರೂ. 20,000/- ಪ್ರತಿ ಮಾಹೆ (ಸಂಚಿತ) (ವಯಸ್ಸು : ಗರಿಷ್ಠ 25)
5	ಮ್ಯಾನೇಜರ್	01	ರೂ.40,000/- ಪ್ರತಿ ಮಾಹೆ (ಸಂಚಿತ) (ವಯಸ್ಸು : ಗರಿಷ್ಠ 35)

ಅರ್ಹತೆ, ವಯಸ್ಸು, ವಿದ್ಯಾರ್ಹತೆಗಳು ಮತ್ತು ಮೀಸಲಾತಿ ವಿವರಗಳು ಹಾಗೂ ಇತರೆ ವಿವರಗಳನ್ನು ಸಂಸ್ಥೆಯ ವೆಬ್‌ಸೈಟ್ www.rims-raichur.com ನಲ್ಲಿ ಪಡೆಯಬಹುದು. ಭರ್ತಿಮಾಡಿದ ಅರ್ಜಿಗಳನ್ನು ನಿರ್ದೇಶಕರು, ರಾಯಚೂರು ವೈದ್ಯಕೀಯ ವಿಜ್ಞಾನಗಳ ಸಂಸ್ಥೆ, ರಾಯಚೂರು ಈ ವಿಳಾಸಕ್ಕೆ ನಿಗದಿತ ದಿನಾಂಕದೊಳಗೆ ಕಳುಹಿಸತಕ್ಕದ್ದು, ಅರ್ಜಿ ಸಲ್ಲಿಸುವ ಕೊನೆಯ ದಿನಾಂಕ : 12.07.2023 ಸಮಯ : 4.00pm.

ನಿರ್ದೇಶಕರು

ರಾಯಚೂರು ವೈದ್ಯಕೀಯ ವಿಜ್ಞಾನಗಳ ಸಂಸ್ಥೆ

ರಾಯಚೂರು

STAFF RECRUITMENT FOR MULTIDISCIPLINARY RESEARCH UNIT (MRU) AND TRAINING OF IN-SERVICE CLINICIANS, RAICHUR INSTITUTE OF MEDICAL SCIENCES, RAICHUR

Applications are invited for recruitment of the following Contractual staff on fixed remuneration in Multidisciplinary Research Unit (MRU) AND Training of In-service Clinicians AND NCDIR-ICMR of Raichur Institute of Medical Sciences, Raichur.

Sr. No.	Name of the Post	No. of Posts	Consolidated pay (INR)	Reservation
1	Research Scientist – II	01	67,000+HRA	GM-01
2	Research Scientist – I	01	56,000+HRA	GM-01
3	Laboratory Technician	02	20,000+HRA	GM-01, SC-01
4	Laboratory Assistant cum Data Entry Operator	01	20,000	GM-01

MANAGER (Training of In-service Clinicians)

1	Manager (Thalassaemia Project)	01	40,000/-	GM-01
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Applicants should note that these posts are NOT under RIMS, RAICHUR establishment

Research Scientist II

Essential Qualifications:

1) **Research Scientist-II /C:** Number of posts: 1

(i) Essential Qualifications

Post graduate degree (MD/MS/DNB) with 1 years of R&D/teaching experience

OR

Postgraduate diploma in medical subjects with 2 years R&D /teaching experience in therequired subject from recognized university;

OR

MBBS recognized by MCI from any institute recognized by MCI or equivalent degree from a recognized University with 4 years R&D/Teaching experience in the relevant subject after MBBS degree;

OR

BDS/B.V.Sc &AH degree recognized by DCI/VCI with 5 years R&D/Teaching experience inthe relevant subject after BDS/B.V.Sc degree;

OR

First class Master's Degree in relevant life science subjects or equivalent degree from a recognized University with 4 years R&D/Teaching experience in the relevant subject after 1stclass Master's Degree ;

OR

Second Class M.Sc, +Ph.D degree in the relevant subject or equivalent from a recognized University with 4 years R&D/Teaching experience in the relevant subject after M.Sc +Ph.D.

(ii) Desirable Qualifications:

- (a) Additional 4 years of R&D experience.
- (b) Doctorate Degree in related science subject or MD in the related subject from a recognized university for candidates with first class relevant degree.
- (c) Additional Post-doctoral research/teaching experience in relevant subjects in recognized institute(s)
- (d) Knowledge of Computer Applications /Data Management

Note:

1. MD/MS/MDS/Ph.D in relevant subject shall be treated equivalent to 3 years' experience.
2. Postgraduate Diploma in medical subjects/M.V.Sc in the relevant subjects shall be treated equivalent to 2 years' experience.

Age limit:

Less than 40 Years as on 01.06.2023.

Research Scientist I

(i) Essential Qualification:

MBBS from any institute recognized by MCI/NMC or BE/B.Tech degree in BioTechnology with 2 years of research experience

OR

First class Master's Degree in Life Sciences or related subject or equivalent degree from a recognized University;

OR

Second Class M.Sc, plus Ph.D degree in Life Sciences or related subject or equivalent from a recognized University.

(ii) Desirable Qualifications:

- (a) Doctorate or M. Tech Degree in related science or engineering subject or MD in the related subject from a recognized university for candidates with first class relevant degree
- (b) Additional Post-doctoral research/teaching experience in relevant subjects in recognized institute(s)
- (c) Two years R&D/Teaching experience in relevant subject after obtaining essential qualification
- (d) Experience of working in similar schemes in Government or any autonomous organization.

Age limit:

Less than 35 Years as on 01.06.2023.

Laboratory Technicians

Essential Qualifications:

1. First class B.Sc. degree in life sciences / Biochemistry/ Microbiology/ Biotechnology or related subject or equivalent degree from a recognized University with minimum **1 year** of working experience in a clinical/ research laboratory and working knowledge of molecular biology equipment
2. Knowledge of Computer applications

Age limit:

Less than 30 Years as on 01.06.2023.

Laboratory Assistant cum Data Entry Operator

Essential Qualifications

- (i) Intermediate or 12th pass from recognized board. A speed test or not less than 8000 key depressions per hour through speed test on computer.

Age limit:

1. Less than 25 Years as on 01.06.2023.

MANAGER (Training of In-service Clinicians)

Essential Qualifications:

1. MBBS preferable with some administrative experience or BDS with MBA or BSc with MBA, Experience in Medical related work is desirable)

Age limit:

Less than 35 Years as on 01.06.2023.

Application Fee : Rs. 500/-

- If any candidate wishes apply for more than one post, he/she shall fill application forms for desired posts separately and shall attach Demand Draft for each post separately.

Interested candidates should forward their applications, in the prescribed format to:

The Director

Raichur Institute of Medical Sciences
Hyderabad Road,
Raichur

The envelope containing the duly filled application form should be superscribed as “Application for the post of....., RIMS Raichur”.

Application should be submitted at the above said address on or before 12th July, 2023

TENURE OF THE POST

Above posts are temporary in nature and will be filled up purely on contractual basis with initial appointments for Eleven (11) months as per rules and regulations of the MRU. The employment on these posts will be temporary, for a fixed term and shall automatically cease on expiry of term without any notice unless renewed or reemployment letter issued.

If the performance of the candidate is not satisfactory during any part of the tenure, the services of the candidate may be terminated with a notice period of 1 month. In case the candidate wishes to leave the contract, they may choose to do so with a notice period of 1 month.

GENERAL TERMS AND CONDITIONS:

- 1) The vacancies mentioned are as per the sanctioning of Department of Health Research (DHR) for Multi-Disciplinary Research Unit.
- 2) Those candidates who are employed in Central Govt. /State Govt. /Union Territories/Statutory Bodies/ Research Organizations etc., should send their applications along with N.O.C through proper channel. However, they may send an advance copy of their application along with requisite documents so as to reach this office on or before the scheduled last date of submission of application.
- 3) Only those applications which are as per the prescribed format will be accepted. Incomplete/ unsigned application, applications without photograph or self-attested copies of requisite documents will be summarily rejected without any communication to the applicant.
- 4) The institute will not be responsible for any postal delay/late delivery of the application and those applications received by post after the scheduled last date of submission will not be accepted.
- 5) Director, RIMS, Raichur reserve all the rights for interpretation of any terms and conditions, or any query/questions arising in this context. The decision of Director, RIMS, Raichur will be final in all the respects. The area of jurisdiction is Raichur only.
- 6) Candidates will not be reimbursed for travel allowance to attend interview/joining.

SERVICE RELATED TERMS AND CONDITIONS:

Recruitment on contractual basis on consolidated remuneration for above mentioned posts is as per the guidelines of DHR. The conditions of employment are:

- 1) The candidate so employed for the purpose will be initially appointed for a period of 11 months. They can be reconsidered for reemployment subject to the conditions prevailing at that time like sanctioning of budget by DHR etc. The reemployment will be done only if the performance of the candidate is found to be satisfactory.
- 2) The selected candidates should produce willingness certificate/acceptance certificate for all the terms and conditions issued at the time of appointment and should enter the contractual agreement in this regard.
- 3) Selected candidate(s) so appointed will not be entitled for any other financial/non-financial Benefits / facilities, or any special allowances except fixed consolidated emoluments as per the DHR rules and regulations regarding establishment of MRU.
- 4) The candidate(s) appointed will not be considered as regular employee of RIMS, Raichur and will not be entitled for any service benefits in this regard. Further, the service of candidate will not be considered as a continuous service at the time of applying/appointment of any other post(s) of the Government of India or RIMS, Raichur.
- 5) Central or state government taxation (as applicable) will be deducted at source from the consolidated/ fixed salary of candidate(s).
- 6) The candidate appointed shall work as per the duty assigned by the Nodal Officer, MRU, RIMS Raichur.
- 7) If any in-service candidate remains on leave for a continuous a period of seven (7) days or more, he/she will automatically be relieved from his/her post
- 8) The contract may be terminated from either the MRU or the candidate in lieu of one month notice period/one month salary.

Application Form for Post of Research Scientist-**II****I**

(Nature of appointment: Contract basis on monthly consolidated remuneration)

(With reference to notice published on date: _____)

Applicant's Detail
(Complete In Block Letters)

1. Name of Candidate: _____

(In block letters)

2. Father / Husband's Name: _____

Affix passport size
photograph (Self
attested) (Do not
staple)

3. Date of Birth: (DD / MM / YYYY) **Age on date of interview:**.....Yrs,.....Mths

Sex: Male/ Female **Category:** GM/ SC/ST/others (Specify) _____

4. Current Postal Address: _____

City: _____ **Pin** _____ **State:** _____

5. Telephone Numbers & Email address:

Mobile No.: _____ **E-mail Address:** _____

6. Academic Qualifications: (Attach separate sheet if required)

Details of Qualifying degree: (Refer method of selection)

Qualifying Degree	Subject	University/ Board	Year of Passing	% of Marks (All years)	% reduced to 85%

Details of Qualification more than required: (Refer method of selection)

Degree	Subject	University/ Board	Year of Passing	Marks

7. R&D / Teaching experience details:

Designation	Institute	Experience From date	Experience to date	Experience in Years & Mths

8. Experience as Scientist in a medical college/ 500 bedded hospital (over and above the required)

Designation	Institute	Experience From date	Experience to date	Experience in Years	Marks (for yrs over the required)

9. Extracurricular activity in sports/ cultural medals obtained in district /state/ national levels (2 marks)

Extracurricular activity	Medals obtained at level	Marks
	<i>district /state/ national</i>	
	<i>district /state/ national</i>	

10. NCC/NSS certificate:

NCC/ NSS certificate	Certificate type NCC(A/B/C); NSS (institutional/ state/ National)	Marks (as in method of selection)
NCC/NSS		

11. Research Publication: (Attach a list of publications including details of: Authors, Title of paper, Journal, Year of publication, Volume, Page Number)

Number of Research Publications (Total)	National Journal	International Journal

12. Present employment:

Designation	Name of Organization/ Employer	Duration		Experience (In Years & Months)
		From	To	

13. Past Work Experience:

Designation	Name of Organization/ Employer	Duration		Experience (In Years & Months)
		From	To	

14. If selected willingness to join within [] days

CHECK-LIST OF DOCUMENTS SUBMITTED

(Please tick (√) Yes/No)

Sl No	Name of the document	Submission status
1	Proof of Date of Birth	Yes / No
2	Category certificate	Yes / No
3	Degree certificate of Qualifying exam	Yes / No
4	Marks cards of qualifying exam	Yes / No
5	Certificate of Qualification more than required	Yes / No
6	Registration certificates of degree (if applicable)	Yes / No
7	Experience certificates of requisite experience	Yes / No
8	Experience certificate as Scientist in a medical college/ 500 bedded hospital	Yes / No
9	Extracurricular activity in sports/ cultural medals obtained in district /state/ national levels	Yes / No
10	NCC / NSS certificate	Yes / No
11	List of Publications/Achievements (if any)	Yes / No

DECLARATION

I confirm that the information given in this application is true and correct to the best of my knowledge and belief. I further undertake that if at any stage it is discovered that an attempt has been made by me, willfully to conceal or misrepresent the facts, my candidature/appointment shall be summarily rejected without any notice.

Place: _____

(Signature of the Applicant)

Date: _____

Application Form for Post of Laboratory Technician

(Nature of appointment: Contract basis on monthly consolidated remuneration)

(With reference to notice published on date: _____)

Applicant's Detail
(Complete In Block Letters)

1. Name of Candidate: _____
(In block letters)

2. Father / Husband's Name: _____

Affix passport size
photograph (Self
attested) (Do not
staple)

3. Date of Birth: (DD / MM / YYYY) **Age on date of interview:**.....Yrs,.....Mths

Sex: Male/ Female **Category:** GM/ SC/ST/others (Specify) _____

4. Current Postal Address: _____

City: _____ **Pin** _____ **State:** _____

5. Telephone Numbers & Email address:

Mobile No.: _____ **E-mail Address:** _____

6. Academic Qualifications: (Attach separate sheet if required)

Details of Qualifying Degree : (Refer method of selection)

Degree	University/ Board	Year of Passing	Marks (%)
BSc			

7. Experience details

Designation	Institute	Experience From date	Experience to date	Experience in Years

8. Present employment:

Designation	Name of Organization/ Employer	Duration		Experience (In Years & Months)
		From	To	

9. Past Work Experience:

Designation	Name of Organization/ Employer	Duration		Experience (In Years & Months)
		From	To	

10. If selected willingness to join within [] days

CHECK-LIST OF DOCUMENTS SUBMITTED

(Please tick (√) Yes/No)

Sl No	Name of the document	Submission status
1	Proof of Date of Birth	Yes / No
2	Category certificate	Yes / No
3	Degree Certificate	Yes / No
5	Certificate of Qualification more than required	Yes / No
6	Experience certificates	Yes / No

DECLARATION

I confirm that the information given in this application is true and correct to the best of my knowledge and belief. I further undertake that if at any stage it is discovered that an attempt has been made by me, willfully to conceal or misrepresent the facts, my candidature/appointment shall be summarily rejected without any notice.

Place: _____

(Signature of the Applicant)

Date: _____

Application Form for Post of Data Entry Operator

(Nature of appointment: Contract basis on monthly consolidated remuneration)

(With reference to notice published on date: _____)

Applicant's Detail (Complete In Block Letters)

1. Name of Candidate: _____
(In block letters)

2. Father / Husband's Name: _____

Affix passport size
photograph(Self
attested) (Do not
staple)

3. Date of Birth: (DD / MM /YYYY) **Age on date of interview:**.....Yrs,.....Mths

Sex: Male/ Female **Category:** GM/ SC/ST/others (Specify) _____

4. Current Postal Address: _____

City: _____ **Pin** _____ **State:** _____

5. Telephone Numbers & Email address:

Mobile No.: _____ **E-mail Address:** _____

6. Academic Qualifications: (Attach separate sheet if required)

Details of Qualifying diploma: (Refer method of selection)

Qualifying Exam	Exam Board	Year of Passing	% of Marks
2 nd PUC Science / 12 th Science pass			

Details of Qualification more than required:

Degree	University/ Board	Year of Passing	Marks (%)
BCA/ MCA/ other Degree			
Computer skill certificates			

7. Experience details

Designation	Institute	Experience From date	Experience to date	Experience in Years

8. Present employment:

Designation	Name of Organization/ Employer	Duration		Experience (In Years & Months)
		From	To	

9. Relevant Past Work Experience:

Designation	Name of Organization / Employer	Duration		Experience (In Years & Months)	Monthly salary
		From	To		

10. If selected willingness to join within [] days

CHECK-LIST OF DOCUMENTS SUBMITTED

(Please tick (√) Yes/No)

Sl No	Name of the document	Submission status
1	Proof of Date of Birth	Yes / No
2	Category certificate	Yes / No
3	12 th / 2 nd PUC (science) pass marks card	Yes / No
4	Certificate of Qualification more than required	Yes / No
5	Experience certificates	Yes / No

DECLARATION

I confirm that the information given in this application is true and correct to the best of my knowledge and belief. I further undertake that if at any stage it is discovered that an attempt has been made by me, willfully to conceal or misrepresent the facts, my candidature/appointment shall be summarily rejected without any notice.

Place: _____

(Signature of the Applicant)

Date: _____

Application Form for Post of Manager

(Nature of appointment: Contract basis on monthly consolidated remuneration)

(With reference to notice published on date: _____)

Applicant's Detail (Complete In Block Letters)

1. Name of Candidate: _____
(In block letters)

2. Father / Husband's Name: _____

Affix passport size
photograph (Self
attested) (Do not
staple)

3. Date of Birth: (DD / MM / YYYY) **Age on date of interview:**.....Yrs,.....Mths

Sex: Male/ Female **Category:** GM/ SC/ST/others (Specify) _____

4. Current Postal Address: _____

City: _____ **Pin** _____ **State:** _____

5. Telephone Numbers & Email address:

Mobile No.: _____ **E-mail Address:** _____

6. Academic Qualifications: (Attach separate sheet if required)

Details of Qualifying degree: (Refer method of selection)

Qualifying Degree	Subject	University/ Board	Year of Passing	% of Marks (All years)	% reduced to 85%

7. Experience details:

Designation	Institute	Experience From date	Experience to date	Experience in Years & Mths

8. Present employment:

Designation	Name of Organization/ Employer	Duration		Experience (In Years & Months)
		From	To	

9. Past Work Experience:

Designation	Name of Organization/ Employer	Duration		Experience (In Years & Months)
		From	To	

10. If selected willingness to join within [] days

CHECK-LIST OF DOCUMENTS SUBMITTED

(Please tick (√) Yes/No)

Sl No	Name of the document	Submission status
1	Proof of Date of Birth	Yes / No
2	Category certificate	Yes / No
3	Degree certificate of Qualifying exam	Yes / No
4	Marks cards of qualifying exam	Yes / No
5	Certificate of Qualification more than required	Yes / No
6	Registration certificates of degree (if applicable)	Yes / No
7	Experience certificates of requisite experience	Yes / No
8	Experience certificate as Scientist in a medical college/ 500 bedded hospital	Yes / No
9	Extracurricular activity in sports/ cultural medals obtained in district /state/ national levels	Yes / No
10	NCC / NSS certificate	Yes / No
11	List of Publications/Achievements (if any)	Yes / No

DECLARATION

I confirm that the information given in this application is true and correct to the best of my knowledge and belief. I further undertake that if at any stage it is discovered that an attempt has been made by me, willfully to conceal or misrepresent the facts, my candidature/appointment shall be summarily rejected without any notice.

Place: _____

(Signature of the Applicant)

Date: _____

Application Form for Post of Medical Social Worker

(Nature of appointment: Contract basis on monthly consolidated remuneration)

(With reference to notice published on date: _____)

Applicant's Detail
(Complete In Block Letters)

1. Name of Candidate: _____
(In block letters)

2. Father / Husband's Name: _____

Affix passport size
photograph (Self
attested) (Do not
staple)

3. Date of Birth: (DD / MM / YYYY) **Age on date of interview:**.....Yrs,.....Mths

Sex: Male/ Female **Category:** GM/ SC/ST/others (Specify) _____

4. Current Postal Address: _____

City: _____ **Pin** _____ **State:** _____

5. Telephone Numbers & Email address:

Mobile No.: _____ **E-mail Address:** _____

6. Academic Qualifications: (Attach separate sheet if required)

Details of Qualifying Degree:

Qualifying Diploma	University/ Board	Year of Passing	% of Marks (All years)

Details of Qualification more than required:

Degree	University/ Board	Year of Passing	Marks (%)

7. Experience details

Designation	Institute	Experience From date	Experience to date	Experience in Years

8. Present employment:

Designation	Name of Organization/ Employer	Duration		Experience (In Years & Months)
		From	To	

9. Past Work Experience:

Designation	Name of Organization/ Employer	Duration		Experience (In Years & Months)
		From	To	

10. If selected willingness to join within [] days

CHECK-LIST OF DOCUMENTS SUBMITTED

(Please tick (√) Yes/No)

Sl No	Name of the document	Submission status
1	Proof of Date of Birth	Yes / No
2	Category certificate	Yes / No
3	Degree Certificate	Yes / No
4	Post Graduate Certificate	Yes / No
6	Certificate of Qualification more than required	Yes / No
7	Experience certificates	Yes / No

DECLARATION

I confirm that the information given in this application is true and correct to the best of my knowledge and belief. I further undertake that if at any stage it is discovered that an attempt has been made by me, willfully to conceal or misrepresent the facts, my candidature/appointment shall be summarily rejected without any notice.

Place: _____

(Signature of the Applicant)

Date: _____

Application Form for Post of Junior Nurse

(Nature of appointment: Contract basis on monthly consolidated remuneration)

(With reference to notice published on date: _____)

Applicant's Detail
(Complete In Block Letters)

11. Name of Candidate: _____
(In block letters)

12. Father / Husband's Name: _____

Affix passport size
photograph (Self
attested) (Do not
staple)

13. Date of Birth: (DD / MM / YYYY) **Age on date of interview:**.....Yrs,.....Mths

Sex: Male/ Female **Category:** GM/ SC/ST/others (Specify) _____

14. _____ **Curre**
nt Postal Address: _____

City: _____ **Pin** _____ **State:** _____

15. Telephone Numbers & Email address:

Mobile No.: _____ **E-mail Address:** _____

16. Academic Qualifications: (Attach separate sheet if required)

Details of Qualifying Degree:

Qualifying Diploma	University/ Board	Year of Passing	% of Marks (All years)

Details of Qualification more than required:

Degree	University/ Board	Year of Passing	Marks (%)

17. Experience details

Designation	Institute	Experience From date	Experience to date	Experience in Years

18. Present employment:

Designation	Name of Organization/ Employer	Duration		Experience (In Years & Months)
		From	To	

19. Past Work Experience:

Designation	Name of Organization/ Employer	Duration		Experience (In Years & Months)
		From	To	

20. If selected willingness to join within [] days

CHECK-LIST OF DOCUMENTS SUBMITTED

(Please tick (√) Yes/No)

Sl No	Name of the document	Submission status
1	Proof of Date of Birth	Yes / No
2	Category certificate	Yes / No
3	Degree Certificate	Yes / No
4	Post Graduate Certificate	Yes / No
6	Certificate of Qualification more than required	Yes / No
7	Experience certificates	Yes / No

DECLARATION

I confirm that the information given in this application is true and correct to the best of my knowledge and belief. I further undertake that if at any stage it is discovered that an attempt has been made by me, willfully to conceal or misrepresent the facts, my candidature/appointment shall be summarily rejected without any notice.

Place: _____

(Signature of the Applicant)

Date: _____