EMPLOYMENT NOTIFICATION NO.:01 / 2024

NATIONAL INSTITUTE OF SIDDHA TAMBARAM SANATORIUM CHENNAI – 600 047

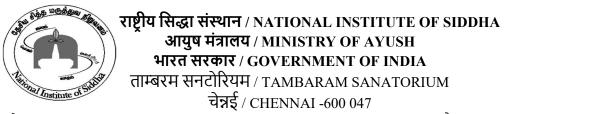
(Candidates applying for the posts of Associate Professor in more than one department / specialty should submit only one application indicating the order of preference)

COST OF APPLICATION Rs.500/-

APPLICATION FOR CONTRACTUAL APPOINTMENT TO THE

POST OF

ASSOCIATE PROFESSOR (SIDDHA MARUTHUVA MOOLA THATHUVAM / UDAL KOORUGAL (ANATOMY) / UDAL THATHUVAM (PHYSIOLOGY)/ NOI ANUGAVIDHI/ GUNAPADAM – MARUNTHAKAVIYAL / VARMA MARUTHUVAM)



फ़ोन / Tele : 044-22411611 ईमेल/ Email: nischennaisiddha@yahoo.co.in फैक्स / Fax : 044-22381314 वेब/Web: https://nischennai.org

> Attested recent passport size photograph to be affixed in the

> > space

A. Name of the post applied for:

(Please indicate in the order of preference)					
1)	4)				
2)	5)				
3)	6)				

Application fee details: Bank Name	DD No
Date	

1. Name and Address (in block letters)

2.Mobile No:

3.Email Id:

4. Sex:		Male		Female		Transgender	(Tick Appropriate Box)
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5. Date of Birth (in Christian Era):

6. Age as on the date of walk-in-interview:

7. Educational Qualifications:

Whether educational and other qualifications required for the posts are satisfied. If any qualification has been treated as equivalent to the one prescribed in the rules, state the authority for the same (with a attested photo copy).

Particulars	Qualification / Experience required	Qualification / Experience possessed by the candidate
(i) Essential		
(ii) Experience		
(iii) Desirable		

(iv) Others			
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(ii) Other Qualifications / Experience : (Research / Administration /Clinical Practice)

- 1.
- 2.
- 3.
- 4.

(iii) Details of the Research Papers: (Use separate sheets for details)

Organisation / Institution		Number of Research papers				
	Published	Accepted	Submitted	Presented in conference		
College / University level						
State level						
National level						
International level						

:

:

:

- 8. Please state clearly whether in the light of above entries made by you, you meet the requirements for the post
- 9. Whether employed at present, if so indicate the nature of employment
- 10. Total emoluments per month now drawn
- 11. Additional information, if any which you would like to mention in support of your suitability for the post. Enclose a separate sheet if the space is insufficient :

12. Whether belongs to	: SC / ST / OBC / GEN			
-	(strikeout whichever is not applicable)			
13. Remarks	:			

I hereby declare that all statements made in the application are true and complete to the best of my knowledge and belief.

Date:

(Signature of the Candidate) Mobile No: Address:

Office / Institution / Organization	Post Held	From	То	Scale of pay & Last Basic Pay	Nature of Duties

Details of employment in chronological order:

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Signature of the candidate