EMPLOYMENT NOTIFICATION NO.:04/2025

NATIONAL INSTITUTE OF SIDDHA TAMBARAM SANATORIUM CHENNAI – 600 047

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

COST OF APPLICATION Rs.500/-

APPLICATION FOR CONTRACTUAL APPOINTMENT TO THE POST OF

- 1. ASSISTANT PROFESSOR (NOI ANUGAVIDHI)
- 2. ASSISTANT PROFESSOR GUNAPADAM MARUNTHAKAVIYAL
- 3. ASSISTANT PROFESSOR (SIDDHAR YOGA MARUTHUVAM)
- 4. ASSISTANT PROFESSOR (MARUTHUVAM)
- 5. ASSISTANT PROFESSOR (SIRAPPU MARUTHUVAM)
- **6. ASSISTANT PROFESSOR (ANATOMY)**



राष्ट्रीय सिद्धा संस्थान / NATIONAL INSTITUTE OF SIDDHA आयुष मंत्रालय / MINISTRY OF AYUSH भारत सरकार / GOVERNMENT OF INDIA

ताम्बरम सनटोरियम / TAMBARAM SANATORIUM चेन्नई / CHENNAI -600 047

A. Name of the post applied for:

ASSISTANT PROFESSOR (NOI ANUGAVIDHI) / ASSISTANT PROFESSOR - GUNAPADAM MARUNTHAKAVIYAL / ASSISTANT PROFESSOR (SIDDHAR YOGA MARUTHUVAM) / ASSISTANT PROFESSOR (MARUTHUVAM) / ASSISTANT PROFESSOR (SIRAPPU MARUTHUVAM) / ASSISTANT PROFESSOR (ANATOMY)

(Please indicate in the order of preference)

	1)					4)		
	2)					5)		
	3)					6)		
В.	Application	n fee de		ank Na			DD) No
1. N	ame and Ado	dress (ir	ı block	letters)				
								Attested recent passport size photograph to be affixed in the space
2.M	obile No:							
3.En	nail Id:							
4. Se	ex:		Male		Female		Transgender	(Tick Appropriate Box)

5. Date of Birth (in Christian	ı Era):	
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6. Age as on the last date of receipt of application:

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).

authority for the same (with a	i attested photo copy).	
Particulars	Qualification / Experience	Qualification / Experience
	required	possessed by the candidate
(i) Essential		
(ii) Experience		
(iii) Desirable		
(iv) Others		

(ii) Other Qualifications	Experience :	(Research	Administration .	/Clinical	Practice)
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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 / EWS

(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:

Details of employment in chronological order:

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

Signature of the candidate

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