## SREE CHITRA TIRUNAL INSTITUTE FOR MEDICAL SCIENCES & TECHNOLOGY THIRUVANANTHAPURAM—695 011, INDIA.

(An Institute of National Importance under Govt.of India)
Phone—(91)0471—2443152 Fax—(91)0471—2446433, 2550728
Email-sct@sctimst.ac.in Web site—www.sctimst.ac.in

# APPLICATIONS ARE INVITED FOR SELECTION TO THE POST OF DRIVER (TEMPORARY)

1. Qualification & Experience : (i) Pass in std. X.

(ii) Should have valid driving license for light & heavy

vehicles.

(iii) Five years experience in driving motor vehicles out of which 3 years experience in driving heavy passenger/goods carrier with public service badge in a reputed

organization.

2. No. of vacancy : UR-7, OBC-2, SC-1 (expected vacancy for 1 year)

3 Nature/Period of employment : Temporary – for a maximum period of 179 days.

4 Age limit as on 01.06.2018 : 30 yrs

5 Monthly Consolidated

Remuneration : Rs.17,300/-

6 Venue : IV FLOOR, Achutha Menon Centre for Health Science

Studies of the Institute at Medical College Campus,

Thiruvananthapuram.

<u>Note:</u> Depending upon the number of candidates a written test and/or trade test may be conducted to shortlist the candidates.

Interested Candidates may submit their application in the prescribed format attached and copy of SSLC, Experience Certificate and Driving license to reach this Office on or before 05.07.2018.

Experience gained after passing Std. X alone will be considered.

Sd/-**DIRECTOR** 

Advt.No.P&A.II/20/Driver-(T)/SCTIMST/2018 dtd.13.06.2018

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### **APPLICATION FORM**

(All Questions must be answered by the candidate)

1)	Name (in capitals)	:				
2)	Post applied for					
3)	Present address with telephone No.	:				
4)	Permanent address with telephone No.	:				
5)	Father's name, occupation and address	:				
6)	Sex	:				
7)	Age & Date of birth	:				
8)	Religion	:				
9)	Married or Single	:				
10)	(a) Are you a member of the Schedule caste / Scheduled Tribe / OBC (Non creamy layer)? If so, specify your caste.	:				
11)	Physical characteristics (i) Height (ii) Weight	:				
12)	Identification marks (i)					
	(ii)					
13)	Driving License No. and date	:				

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15. Academic record (including course attended)

Sl.	Name of Examination	Name of Board / University	Date of	Date of	Year of	Rank/
No.			entry	leaving	passing	Class

16. Previous employment history

Sl.	Name & Address of Designation & Sa		Peri	od	Reason for leaving		
No.	employer	Nature of work with grade	From	То			

17	. I	f se	lected,	approxima	ate time	required	l to	join (	duty:
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(1)

(2)

#### **DECLARATION**

I declare that the above furnished details are true and correct to the best of my knowledge and belief. I am aware that in the event of my furnishing any false information, the Institute reserves its right to terminate my service without notice.

Thiruvananthapuram	
Date:	Signature of the candidate