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



(An Institute of National Importance under Govt. of India) Grams: CHITRAMET Phone: 0471–2524 437/ 2524 637 / 2443 152 Email: projectcell@sctimst.ac.in Website: www.sctimst.ac.in

WALK–IN INTERVIEW FOR SELECTION TO THE POST OF SENIOR RESEARCH FELLOW(Medical)

for the Project "Indo-Us Collaborative Stroke Registry and Infrastructure Development" (# 5252)

1. Qualification : MBBS 2. Job details : Collection of data of the Patients, record maintenance and follow up, data management, research paper presentation 3. Age limit : 35 yrs as on 31.12.2012 4. Number of Vacancies : One : ₹ 25,000/- per month 5. Consolidated Pay 6. Tenure of Appointment : Six months (extendable) 7. Nature of Appointment : On Contract 8. Time & Date of Interview : 11 a.m. on *Thursday*, 27th December, 2012 9. Venue : Mini Conference Hall, 3rd Floor, AMC Building, Sree Chitra Tirunal Institute for Medical Sciences and Technology, Medical College Campus, Thiruvananthapuram 10. Reporting time : 10 a.m.

<u>Note</u> : If there are no eligible candidates, those with BHMS / BAMS degree will be considered. Age relaxable in exceptional cases.

Interested candidates may report for the *Walk-in Interview* with the certificates in original in proof of qualification, experience and age at the **Project Cell**, 2nd floor AMC Building, SCTIMST, Medical College PO, Trivandrum

P&A/PC/5252(26/12)/SCTIMST/2012 dtd.12.12.2012

DIRECTOR



SREE CHITRA TIRUNAL INSTITUTE FOR MEDICAL SCIENCES & TECHNOLOGY THIRUVANANTHAPURAM - 695011

Affix your recent Passport–size Photograph

INTERVIEW REPORT FORM

(All questions must be answered by the candidate)

Name of the Post			
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1.	Name (i	n CAPITALS)					
2.	Sex		3.	Age	4.	Date of birth	

5. Academic record (including course attended)

Name of Examination	Name of Board/ University	Year of Passing	% of Marks & Class

6. Previous Employment History

SI.	Name & Address of	Designation & Salary	Nature of Work	Period		
No	employer	Salary		From	То	

	Father's name								
7	Occupation								
	Address								
8	Religion					Caste			
	a. Are you a mem Schedule Cas		ŀ	If YE	S, specify you	ur caste.			
9	b. Are you a mem Schedule Trib	e?	ŀ	If YE	S, specify you	ur Tribe.			
	c. Is any of your re employed in SC		l c	lf YE: desig	S, indicate na nation & rela	ame(s), ationship		1	
10	Married or Single		1	11	If married, th	ne name of	spouse		
12	Physical characteristics	Height		·		cm	Weig	;ht	Kg
13	Identification	1.							
13	marks	2.							
14	Employment Exch Registration No. a								
15	Present Contact Address								
		Email							
		Tel				Mo	b		
46	Permanent								
16	Address								
		Tel				Mo	b		
L									

17	If selected, approximate time required to join duty
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40	
18.	
Name & address of	
address of	
two references	
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DECLARATION *I affirm 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 :