

## JAGADGURU SRI SHIVARATHREESHWARA MEDICAL COLLEGE

(Constituent College of JSS University established under Section-3 of UGC Act)
(Recognised by Medical Council of India, New Delhi)
Sri Shivarathreeshwara Nagar, Mysore-570 015, Karnataka, India

РНОТО

## APPLICATION FOR THE POST OF.....

1.Name		
(IN BLOCK LETTERS)		
2. a) Permanent Address		
2. <i>a)</i> 1 emianem 1 aar ess		
	Mobile	
	Phone Number	
b) Address for communication		
(IN BLOCK LETTERS	S)	
	D1 N	
	Phone No.	
	E-mail ID	
3.Date of Birth		
4.Nationality		
5.Religion		
6.Caste		
7.Marital status		

## 8. Qualifying examination passed

Examination Passed	College	University	Year of Passing	Max Marks	Marks Obtained	%	Class	Attempt

9. Experience post held (mention chronologically to date):

Post held	Institution	From	То	Total experience
<u> </u>		1	1	
10 11 11 11				
10. Administrative or o	other experience:			
11. Details of Member	ship of Academic profes	sional bodies:		
	1			
12. Research Work Ex	perience:			
40.37 1 05.17				
13. Number of Publica	tions:			

14. Reference if any (Name, Position, Address, Phone/Mobile/e-mail ID to be given)	1.	2.
Date:		
Place		Signature of Applicant

N.B.: Enclose True/photocopies of certificates in support of above statements. If space above is not sufficient, attach additional sheet.