



[Earlier Known as Jagadguru Sri Shivarathreeshwara (JSS) University]

**Applications are invited for the following posts
at JSS Medical College, Mysuru**

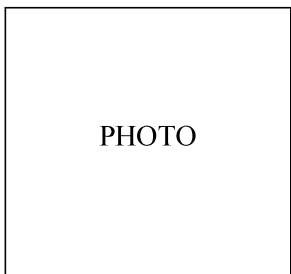
Sl. No.	Post	Departments
1.	Professor	Urology, Plastic Surgery, Emergency Medicine, Immuno Haematology & Blood Transfusion (IHBT), Radiology
2.	Associate Professor	Plastic Surgery, Emergency Medicine, Immuno Haematology & Blood Transfusion (IHBT)
3.	Asst. Prof.	Plastic Surgery, Immuno Haematology & Blood Transfusion (IHBT)
4.	Sr. Resident	Surgery, OBG, Radiology

Note: 1. Qualification and experience as per MCI norms.
2. Salary will be commensurate with qualification and experience.

The application form may be downloaded from the University **Website: www.jssuni.edu.in** and the filled in application form shall be submitted on or before **27.02.2018** to the **Principal, JSS Medical College, Sri Shivarathreeshwara Nagar, Mysuru-570 015** along with the application fee of Rs.120/- Payable in the form of DD in favour of the **Registrar, JSS University, Mysore.**

Sd/- Registrar

Size: 8cm X 12cm



JSS MEDICAL COLLEGE

(Constituent College)

Jagadguru Sri Shivarathreeshwara University

(Deemed to be University)

Accredited 'A' Grade by NAAC

P: +91 821 2548337 | 2548338 | F: +91 821 2548345/2493819



APPLICATION FOR THE POST OF _____

1.Name (IN BLOCK LETTERS)	
2. a) Permanent Address	
Mobile	
Phone Number	
b) Address for communication (IN BLOCK LETTERS)	
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	To	Total experience

10. Administrative or other experience:

11. Details of Membership of Academic professional bodies:

12. Research Work Experience:

13. Number of Publications:

14. Reference if any
(Name, Position, Address,
Phone/Mobile/e-mail ID
to be given)

1.	2.
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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.