

Government of Karnataka
HASSAN INSTITUTE OF MEDICAL SCIENCES, HASSAN
 APPLICATION FOR THE POST OF DIRECTOR
HASSAN INSTITUTE OF MEDICAL SCIENCES, Hassan

Affix
Passport size
Photograph

(Please fill Sl. No. 1 to 4 in Capital Letters Only)

1	Name of the Applicant					
2	Name of the Father /Mother /Spouse					
3	a. Permanent address					
	b. Postal Address for the correspondence					
	c. Mobile Number					
	d. E-mail ID					
4	a. Date of Birth & Age (as recorded in the SSLC certificate)					
	b. Nationality					
	c. Religion					
	d. Caste & Category					
	e. Sex					
5	Qualification (Enclose Relevant Documents)					
Sl. No.	Qualification	Marks / Grade	Percentage	Name of the College	University	Year of Passing
a	SSLC					
b	PUC					
c	MBBS					
d	MD/MS					
e	M.ch /DM					
f	Any other equivalent or additional qualification					

6	Particulars of registration with State Medical Council (Enclose Relevant Documents)					
7	Teaching Experience (Enclose Relevant Documents)					
Sl. No	Designation	Period				
		From	To	Total No. of years	Name of the College	Name of the University
a	Tutor / Demonstrator / Resident / Registrar					
b	Assistant Professor / Lecturer					
c	Associate Professor					
d	Professor					
e	Professor & HOD					
8	Present place of working & Designation					
09	No. of years of administrative experience (Supportive document enclosed)					
10	Experience as: a) Dean /Director/Professor/HOD b) Principal c) Medical Superintendent of Teaching Hospital d) Joint Director (Medical Education) e) Deputy Director (Medical Education)			No. of years		
11	Total Number of Experience as Professor					
12	Achievement / Other information (Enclose Relevant Documents)					
A	Paper Presentations					
	a. State Conference					
	b. National Conference					
	c. International Conference					
B	Paper Published					
	a. National Journals					
	b. International Journals					
Note: Publication: Only full articles in indexed journals, journals of national association/ socialites will be accepted, case reports, abstracts, internet journal articles, articles in journals unrelated to the subject of will not be accepted.						

C	Sports & other cultural Activities.	
	a. University Level	
	b. State Level	
	c. National Level	
	d. International Level	
D	Any other Information	
13	Whether Assets and Liabilities statement filed ever year for the last 5 years (Enclosed copies)	
14	In the last Six years a) The post /designation under which the candidate was/ is working b) Progress achieved in each designation c) Details of Innovative initiatives made by the applicant d) The results obtained because of these initiatives	
15	Any other information the candidates wishes to state	
16	Details of the personal interest/ stake holdings / patron/ membership/shares/honorary membership in any of the private establishment/ society/ trust/ nursing/ homes/ pvt. Hospitals/diagnostic centers/ Pharmacies/ or any other business/charity of which the applicant/ wife/ children are part of in any capacity with regard to Health and Medicine should be furnished voluntarily with all details including name of the entity, capacity in which the applicant is working and annual income from the same.	
17	Particulars of Demand Draft	D.D.No.....& Dated..... Rs.....Bank..... ...

Note: Candidate should enclose relevant supporting documents on all the above aspects. Incomplete applications are liable to be rejected.

DECLARATION

I hereby solemnly & sincerely affirm that the statements made and information furnished by me in the application form and also in the enclosure(s) submitted by me are true and correct to the best of my knowledge and belief, I also hereby declare that during my previous service I have not been subjected to the Departmental Enquiry and punished or convicted under any criminal case. If any information furnished therein is found to be fraudulent, incorrect or untrue, I am liable for criminal prosecution and cancellation of any appointment. I agree to abide by the Rules and Regulations prescribed by the Government of Karnataka / bye-law of Hassan Institute of Medical Sciences, Hassan.

Date:

Place:

Signature of the Applicant.