NIZAM'S INSTITUTE OF MEDICAL SCIENCES

(A UNIVERSITY ESTABLISHED UNDER STATE ACT)

© 040-23489000 / 9244 • 040-23396552

🖶 Fax: 040-23310076

Panjagutta, Hyderabad - 500082, Telangana

www.nims.edu.in

Rc. No. HR3/034/2024/Pharmacist

NOTIFICATION

Applications are invited from suitably qualified and experienced candidates for the post of Pharmacists, purely on contract basis.

| Name of the Post | Qualifications / Experience | Consolidated Pay |
|-----------------------------------|---|------------------------|
| Pharmacist (On Contract basis) | Essential Qualification: Passed in D. Pharmacy (Diploma in Pharmacy). | Rs. 32,670/- Per month |
| | Registered by Telangana State Pharmacy Council | |
| | Experience – 3-5 years in more than 500 bedded hospital | |
| Tenure | One year | |
| No. of Posts | Three (3) | |

- 1) Applicant should know that the appointment to be made purely on temporary / contract basis and there is no right for claiming for any regular appointment in NIMS.
- 2) No TA / DA will be paid for attending the interview for joining the post.
- 3) The application should be submitted in standard Proforma (Appendix "A") and must be accompanied by attested copies of certificates in support of all information furnished in the application.
- 4) Applications without supporting documents will be summarily rejected.
- 5) Last date for receipt of filled in applications is on or before 11.03.2024 by 4.00 p.m.
- 6) Date, Time and Place of interview will be informed over phone / email.
- 7) Address to which the applications should be sent to:
 The Executive Registrar
 Nizam's Institute of Medical Sciences
 Punjagutta, Hyderabad 500 082 T.S.
- 8) Please mention the notification number on the sealed cover.

EXECUTIVE REGISTRAR I/C

Appendix - "A"

| | 1) | Application fo | r the post of | : | | | |
|-------|------------------------------|--|--|---------------------------|---------|------------|------------------------|
| | 2) | Name of the C (In Capital Le | andidate in full etters) | : | | | |
| | 3) | Date of Birth | | : | | | |
| | 4) | Nationality | | : | | | |
| ; | 5) Address for Communication | | : | | | | |
| (| 6) | Permanent Addre | ess | | | | |
| 7 | 7) | Educational Qua | alifications | | | | - |
| | Na | ame of the | Name of the | Month and | Marks | % of marks | Class / |
| | Ех | am Passed | Institution . Board / University | Year of Exam Passed | Secured | secured | Division / Declared |
| | Ех | am Passed | Institution . Board / | Year of Exam | 1 | · | Division / |
| | Ex | am Passed | Institution . Board / | Year of Exam | 1 | · | Division / |
| 0 | | | Institution . Board / University | Year of Exam Passed | Secured | secured | Division / Declared |
| |) | Previous Experiennstitution, etc.,): Present Position | Institution . Board / University | Year of Exam Passed | Secured | secured | Division / Declared |
| 8 |) | Previous Experien | Institution . Board / University | Year of Exam Passed | Secured | secured | Division / Declared |
| 8 9 |) [| Previous Experien nstitution, etc.,): Present Position | Institution . Board / University | Year of Exam Passed | Secured | secured | Division / Declared |
| 8 9 1 |) [| Previous Experien nstitution, etc.,): Present Position Mobile Number | Institution . Board / University ce (Furnish name : | Year of Exam Passed | Secured | secured | Division / Declared |

Place:

Date :

Signature of the Candidate

4wg 000