



**JAWAHARLAL INSTITUTE OF POSTGRADUATE MEDICAL EDUCATION AND  
RESEARCH, PUDUCHERRY – 605006**

(An Institution of National Importance under Ministry of Health & Family Welfare, Government of India)

**DEPARTMENT OF PHARMACOLOGY**

Date: 06.08.2020

**Advertisement for the contractual post for an ICMR funded project**

Applications are invited for the contractual post of Scientist B (Medical or Non-medical) for the project titled "Evaluation of the prescription pattern of drugs in different OPDs of a tertiary care hospital" for a period of six months.

**The Interview will be held on 14-08-2020 (Friday) for the position mentioned above at 10.00AM in Dept. of Pharmacology, III Floor, Institute Block, JIPMER, Puducherry – 6 in person as well as online.** The candidates are expected to be present in the venue by 9.00 am or online by 9.30 am. Applicants will not be entertained after 10.00 A.M. under any circumstances.

**Terms:** Position is purely temporary. However, the appointment can be terminated any time even before the end of the duration of contract period due to any reason. In case of resignation by the candidate, the candidate can leave the job by giving one month's notice or one month's salary in lieu of the same.

**Selection procedure:**

Interview of the eligible candidates will be conducted both in person and online. Based on interview marks the first rank candidate will be selected for the post.

**Only those applicants who have submitted their application before last date will be allowed for the interview.** Please note that no complaints will be entertained if the candidate misses the date for the interview. **NO SEPARATE CALL LETTERS WILL BE SENT TO APPLICANTS IN ANY FORM.**

No TA/DA will be paid to the candidate for appearing in the written test/interview.

**General Terms:**


**Qualification:**

1. Qualifications and degree should be from recognized Institution/University.



**Application filling and submission details**

Fill the application form in a word file (Format is provided in Annexure 1). Download it and paste your recent passport size photo and affix signature. Scan the filled form and mail it to [mirunalini2012@gmail.com](mailto:mirunalini2012@gmail.com) or [drjayanthi2008@gmail.com](mailto:drjayanthi2008@gmail.com) on or before 12<sup>th</sup> August 2020. Eligible candidates will be invited for the interview by mail and the link for video conferencing will be shared prior to the interview on the mobile number provided in the application form.

  
**Dr. R. RAVEENDRAN**  
Professor (Sr. Scale)  
Dept. of Pharmacology  
VIPMER, PUDUCHERRY-6.

**Annexure –I**

**Application Form**

1. Name in full (IN BLOCK LETTERS) :
2. Mother's / Father's/Husband's Name :
3. Address for Correspondence :
4. Permanent Address :
5. Date of Birth : Age:
6. Educational Qualification :



Mobile No:

E-mail ID:

<b>S.No</b>	<b>EXAM PASSED</b>	<b>GRADE</b>	<b>YEAR OF PASSING</b>	<b>BOARD / UNIVERSITY</b>	<b>SPECIALIZATION</b>
1.	12th				
2.	B.Sc				
3.	M.Sc				
4.	Any other (specify)				

7. Work Experience: \_\_\_\_\_ years \_\_\_\_\_ months

<b>S.No</b>	<b>PERIOD</b>	<b>POST HELD &amp; SCALE OF PAY</b>	<b>NAME OF THE EMPLOYER</b>	<b>REASON FOR LEAVING</b>

8. If selected what period would you require for joining the post : 1 week /1 month / other

9. Have ever been declared unfit by a Medical Board / Court \_\_\_\_\_ yes / No \_\_\_\_ for appointment in any Govt. / Service? if yes, give details

10. Have you ever been tried / convicted for any crime by any court of law \_\_\_\_\_ yes/ No \_\_\_\_\_

DECLARATION BY THE CANDIDATE:

I do hereby declare that the particulars furnished in this form by me are true to the best of my knowledge and belief and I take all the responsibility to myself.

Date:

Place:

Signature of candidate

**Filed application should be scanned sent by mail to the following mail ids on or before 12<sup>th</sup> August 2020.** We will not accept handing over of applications directly.

[mirunalini3012@gmail.com](mailto:mirunalini3012@gmail.com), [drjayanthi2008@gmail.com](mailto:drjayanthi2008@gmail.com)

(For any queries contact Dr. M. Jayanthi, email id: drjayanthi2008@gmail.com; Phone (Office): 04132296352)