

## Applications are invited for appointment to the following posts to School of Public Health, JSS Medical College, Mysuru.

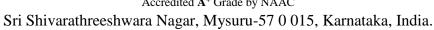
Post	posts required	qualification
	01	MBBS+MPH or
Assistant Professor		MD (Community Medicine)
Assistant Floresson	05	BAMS/BDS/BHMS/BPT/BSMS/BVSc/
	05	PharmD +MPH
Biostatistician	01	M.Sc Biostatistics + Ph.D

Application form may be downloaded from the JSS AHER Website viz...www.jssuni.edu.in and the filled in Application form shall be submitted on or before 30-12-2021 to the Principal, JSS Medical College, Sri Shivarthreeshwra Nagar, Mysuru-570015.

**Sd/- Registrar** 

## JSS Academy of Higher Education & Research

(Deemed-to-be-University) Accredited **A**<sup>+</sup> Grade by NAAC





Phone No.: 0821-2548392/93 Fax No.: 0821-2548394, mail: <a href="mailto:registrar@jssuni.edu.in">registrar@jssuni.edu.in</a> web: <a href="mailto:www.jssuni.edu.in">www.jssuni.edu.in</a>

No  Application for the post of:  Department	Affix recent passport size photograph						
1. Name in Full (in block letters):							
2. Father / Husband Name:							
3. Date of Birth: Age: Sex:							
4. a) Nationality: b) Religion: c) Caste:							
d) Mother Tongue: e) Marital Status: f) Home state:							
5. Address:							
Pin Code: Phone / Mobile No. :  E-Mail:							
6. Languages known (Tick the appropriate box)							
Language known							
To Read							
To Write							
To Speak							

7. a) Educational / Career / Qualifications (Please attach one set of attested copies along with this application)

Sl. No	Carrer	Name of the Institution	Year of Passing	Class / Grade	% Marks
1	Std 10 <sup>th</sup> or equivalent				
2	12 <sup>th</sup> / II PUC / equivalent				

b) Under Graduate	b	
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Name of the	Examination	University	Dura	tion	Class	% Marks
Institution	passed	Board	From	To	Class	Marks

c) Post Graduate (Degree / Diploma)

Name of the	Examination	University	Dura	tion	Class	%
Institution	passed	Board	From	To	Class	Marks

8. a) Work Experience (Please list your previous employment details starting with the latest / Chronologically).

Sl. No.	Name of the Employer	Period	Design / Post held	Scale of Pay	Total Emoluments (₹)

b) Administrative or other experience:				
c) Details of Membership of Academic / Professional bodies / Registration No				
d) Details of Publication & Research				

9. a) Name & address of 2 references: 1	_ 2
	<del></del>
b) Indicate your willingness to work any where	
10. Details of fee paid:- Application Fees Rs	receipt No./DD No
& date (Receipt / DD should	be enclosed with the application).
11. List of Enclosures:	
1	2
3	4
5	6
7	8
	he above certificates / degrees, in support of age Γhe information given above is true & correct to th
Place:	
Date:	(Name and signature of the candidate)
	g cash of Rs.120/- in the Office of JSS Academy of Medical Education Institutions Campus St

Shivarathreeshwara Nagara, Mysuru.

OR

Application may be down loaded from the website "jssuni.edu.in" and filled application may be submitted to the above address along with DD of Rs.120/- payable at Mysuru in favor of "Registrar, JSS Academy of Higher Education & Research, Mysuru".