

NIZAM'S INSTITUTE OF MEDICAL SCIENCES
(A UNIVERSITY ESTABLISHED UNDER THE STATE ACT)
PANJAGUTTA ::::::::::: HYDERABAD – 500 082, T.S.

Rc.No:HR1/140/2025/R.

Dt: 07-03-2025

WALK IN INTERVIEW

- 1) Applications are invited from the eligible Candidates along with a registration fee of Rs.5000/-to be paid through online at NIMS Academic account No.50200082261426, HDFC Bank, IFSC Code No. HDFC0004290, for filling up the posts of Medical Officers & Senior Residents in the Department of Emergency Medicine.
- 2) The required qualifications for Medical Officer / Senior Resident is as follows:

Sl.	Department	Qualification	Designation
1	Emergency Medicine	MBBS	Medical Officers
2	Emergency Medicine	MD/DNB General Medicine, Emergency Medicine Anaesthesiology/ Pulmonary Medicine, General Surgery	Senior Residents
3	Anaesthesiology	MD/DM	Senior Residents
4	Radio-diagnosis	MD/DNB (Radiology & Imageology)	Senior Residents

- 3) The other details of Application form can be downloaded from the institute website www.nims.edu.in. **All the Aspirants for Medical Officers & Senior Residents should provide power point presentation of their academic and experience. Limited to 5 slides.**
 - i) The eligible qualification should be recognized by the National Medical Commission.
 - ii) Applications of the candidates who do not fulfill the required qualification & Experience and not submitted other necessary documents will be rejected summarily and no Correspondence shall be entertained.
 - iii) For Medical Officers Rs.50,000/- per month and Senior Residents will be paid a Consolidate amount of Rs.1,21,641/- per month.
- 4) Candidates, interested may attend for Walk in Interview with filled in application down load from the Institute website www.nims.edu.in. along with certificates and by paying Rs.5000/- in NIMS cash counter.
- 5) The Institute reserves the right to fill up or not to fill up the posts notified. Walk in interviews will be conducted on 17-03-2025 between 09 am -11 am for Medical Officers and 02 pm to 04 pm Senior Residents in the Chambers of Director, 1st Floor, NIMS, Hyderabad.

Sd/-
DIRECTOR



NIZAM'S INSTITUTE OF MEDICAL SCIENCES
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PUNJAGUTTA :: HYDERABAD 500 082, T.S.

APPLICATION FORM FOR MEDICAL OFFICERS

Application Number _____

Post Applied for:

Department:

Affix self-attested
Latest pass port
Size photograph

1. Full Name (in block letters) : _____
Surname Name
2. Father's Name :
3. Spouse's Name :
4. Date of Birth :
5. Marital Status : Married / Unmarried

6. Full Postal Address

Permanent Address	Present address for communication

7. Social Status :

8. Place of Birth :

12. Examination passed including graduate examination. (Enclose Xerox copies).

Name of the examination	Name of the College & University	Month & Year of passing the examination	MCI Recognition status	a) Class / Division b) Distinction or prize, If any, in any or more subjects
M.B.B.S.				
Other qualifications if any				

13. Pan Number:

Signature of the Applicant

PARTICULARS OF ENCLOSURES:

1. X Class or equivalent Certificate
2. Study and Conduct Certificate of MBBS from the Principal of the College where studied.
3. MCI Recognition status.
4. Permanent Telangana Medical Registration Certificate
5. Provisional or Final MBBS Degree Certificate
6. No Objection Certificate from Employer (if applicable).
7. Experience if any.
8. Performance report from the previous employer, (if applicable)

9. Place of Schooling : 1st class to 10th class

Sl.	Class	Name of the School Studied	Place of study	Period of Study
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

10. Telephone No. : STD Code: _____ Tel. No: _____

Mobile: _____

11 Email ID:



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SENIOR RESIDENTS APPLICATION FORM

Application Number _____

Post Applied for:

Department:

1. Full Name (in block letters) : _____
Surname Name
2. Father's Name :
3. Spouse's Name :
4. Date of Birth :
5. Marital Status : Married / Unmarried
6. Full Postal Address :

Permanent Address	Present address for communication
<input type="text"/>	<input type="text"/>

7. Telephone No. : STD Code: _____ Tel. No: _____
Mobile: _____

8. Email ID:

Contd 2.

9. Social Status :

10 Place of Birth :

11. Place of schooling from 1st – 10th class:

12. Examination passed including postgraduate examination. (Enclose Xerox copies).

Degree	Name of the College & University	Month & Year of passing the examination	MCI Recognition and Permanent Medical Registration	a) Class / Division b) Distinction or prize, If any, in any one or more subjects
M.B.B.S.				
Postgraduate Qualification				
i) MD/MS/DNB*				
ii) D.M./M.Ch/ DNB * (Duration of the Course)				
Any other Qualification (s)				
i)				
ii)				
iii)				

* DNB: The bed strength and single / multi specialty type of hospital to be provided.

13. Teaching Experience if any in MCI Recognized / Central Institute:

Sl	Designation	College/Institute	From to	MCI Recognition

14. Research Experience:

Sl.	Title of Article	Authorship first/2 nd /others	Type of article Original/ Case report / review /CME Proceeding	Journal National/ International	Impact factor	Citation index

15. Any specialized training received in India/ Abroad :

16. Awards/ Recognitions :

17. Fellowships & Memberships :

a) Profession Bodies

b) Social Organizations

18. Number of Papers presented in

State conferences :

National conferences :

International conferences :

19.	<p>a) Are you employed currently? If Yes, NOC from the employer</p> <p>b) Are you a Government Servant, if yes, are you entitled to pension.</p> <p>If yes, will you give up your status before joining the Institute</p>	<p>Yes or No</p>
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20. Monthly emoluments being drawn at present :

21. Notice required for joining service if selected :

22. State Regional Language or languages you know:

a) To read and write

b) To speak also.

23. Income Tax PAN Number

24) Aadhar Number

Signature of the Applicant

PARTICULARS OF ENCLOSURES:

1. X Class Certificate/ Equivalent certificate.
2. Study and Conduct Certificate of MBBS//MD/MS/DM/M.Ch/ DNB course by the Principal of the College where studied.
3. T S M C Medical Registration Certificate is mandatory
4. MCI Recognition status
5. Provisional or Final MBBS/MD/MS/DM/M.Ch/ DNB Degree Certificate
6. No Objection Certificate and performance report from the current Employer.
7. Experience (designation; date of service from and to- should be mentioned clearly).
8. Publications (Reprints to be provided at the time of interview).
9. Bank Account