

FORM-A

NIZAM'S INSTITUTE OF MEDICAL SCIENCES
(A University established under State Act)
Panjagutta, Hyderabad-500 082

Advertisement

Notification No: SRC/AC-4/ **863/2026**

Applications are invited from suitably qualified and experienced candidates in the prescribed format for the temporary post(s) mentioned below in the research project titled "....."

Name of the Post	No. of posts	Tenure of the post	Salary per month. (Rs)(Consolidated)	Requirement of (i) Qualification (ii) Age limit and (iii) experience (as per guidelines)
Coordinator	01	05 years	30,000	Pharma D or B.Sc. Computer Sciences with 80% or above

2. Applicants should note that the appointments to be made are purely temporary and there is no right for claiming for any regular appointment in NIMS.

3. Other terms and conditions will be explained at the time of interview.

4. No T.A/D.A will be paid for attending the interview or for joining the post.

5. The application should be submitted in the enclosed format and must be accompanied by attested copies of certificates in support of all information furnished in the application. (the application can be download from website).

6. Last date for receipt of filled-in applications: - **on or before 05.09.2026 by 4 PM**

7. **Date of Interview** – will be communicated over phone/e-mail to short listed candidates only
Venue:- Dean's office, NIMS.

8. Address to which the applications should be sent: **Dean's office, Nizam's Institute of Medical Sciences Punjagutta, Hyderabad – 500082**

9. Mentioned the notification number and the last date of the application on the closed envelop cover.


6/7/26

Signature of the Principal Investigator

FORM-B
FORMAT OF APPLICATION

Notification No:

1. Application for the post of :
2. Name of the candidate in full :
(in capital letters)
3. E-mail ID & Mobile No. :
4. Date of Birth :
5. Nationality :
6. Address for communication :

7. Permanent address :

8. Educational Qualifications :

S.No.	Name of the Exam Passed	Name of the Institute/Board/University	Month and year of Exam Passed	Marks Secured	% of Marks Secured	Class Division Declared
1						
2						
3						
4						

9. Have you passed "NET"/CSIR ? :
If 'yes', please indicate
(i) Name of the exam. Passed :
(ii) Date of passing exam. :
10. Previous experience :
(Furnish name of the post /
fellowship, period worked,
name of the organization /
institution etc.)
11. Present position. :
12. Any other information :

Date:

Signature of the candidate