



**SREE CHITRA TIRUNAL INSTITUTE  
FOR MEDICAL SCIENCES & TECHNOLOGY**

Thiruvananthapuram – 695 011, Kerala, India

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REQUIRES  
for its Research Project # 6084

Post & Job Details	<b>STAFF NURSE</b>		
	Nursing Care for Patients in Neuro Interventional ICU		
Project Details	<b>Neuro Intervention Centre</b>		
Vacancy	<b>Fifteen</b>	Tenure and Nature of Appointment	<b>One Year</b> (may be extended) <b>On Contract basis</b>
Salary	Rs. <b>16,000</b> per month ( <i>Consolidated</i> )		
Age limit	Below <b>35</b> years as on 30.09.2012.		
Qualification	a) 'A' grade <b>Diploma in General Nursing and Midwifery</b> with at least <b>three years experience</b> in clinical nursing. <b>OR</b> <b>BSc Nursing</b> with at least <b>two years experience</b> in clinical nursing b) Should be a <b>registered</b> nurse and midwife with <i>registration certificate from Kerala Nursing Council /any recognized branch of Indian Nursing Council.</i> <b>Mandatory:</b> Should have <b>two years experience</b> in Neurology / Cardiology ICU or Neurosurgery / Cardiac Surgery ICU or <b>Diploma in Neuro / Cardio Nursing.</b>		

**WALK-IN INTERVIEW**

Mode of Selection Depending upon the number of candidates, a **Written Test** may also be conducted.

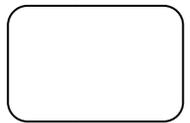
Date & Time **10 a.m., Thursday, 11 October 2012**

Mini Conference Hall, 3<sup>rd</sup> Floor, AMCHSS

Venue Sree Chitra Tirunal Institute for Medical Sciences and Technology,  
Medical College Campus, Trivandrum

Reporting time for Interview **8:30 a.m.**

Qualified and interested candidates should report with duly filled Interview Report Form (*given below*) and **Certificates in original** to prove their qualification, experience and age at the **Registration Desk, Auditorium, Ground Floor, AMC Building, SCTIMST.**



**SREE CHITRA TIRUNAL INSTITUTE FOR MEDICAL SCIENCES & TECHNOLOGY  
THIRUVANANTHAPURAM - 695011**

**INTERVIEW REPORT FORM**  
*(All questions must be answered by the candidate)*

Affix your recent  
Passport-size  
Photograph

Post applied for	<b>STAFF NURSE</b>	RECR # 16/12
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1	Name (in CAPITALS)			
2	Sex			
3	Age	Date of birth		
4	Registration with Nursing Council	Reg. No		
		Date		
		State in which registered		

**5. Academic Record**

Sl. No	Name of Examination	Name of Board/ University	Year of entry	Year of leaving	Year of passing	Class
1	10 <sup>th</sup>					
2	12 <sup>th</sup>					
3						
4						
5						
6						

**6. Previous Employment History**

Sl. No	Name & Address of employer	Designation & Salary	Nature of Work	Period		Reason for leaving
				<i>From</i>	<i>To</i>	

7	Father's name				
	Occupation				
	Address				
8	Religion			Caste	
9	a. Are you a member of a Schedule Caste?			If YES, specify your caste.	
	b. Are you a member of a Schedule Tribe?			If YES, specify your Tribe.	
	c. Is any of your relatives is employed in SCTIMST?			If YES, indicate name(s), relationship, designation etc.	
10	Married or Single		11	If married, the name of spouse	
11	Physical characteristics	Height		cm	Weight
12	Identification marks	1.			
		2.			
13	Employment Exchange Registration No. and Date				
14	Present Contact Address				
		Email			
		Tel		Mob	
15	Permanent Address				
		Tel		Mob	

16	If selected, approximate time required to join duty	
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17. Name & address of two references:

(i)

(ii)

### DECLARATION

I declare that the above-furnished details are true and correct to the best of my knowledge and belief. I am aware that in the event of my furnishing any false information, the Institute reserves its right to terminate my service without notice.

*Thiruvananthapuram*

Date :

*Signature of the Candidate*