

Advertisement

**NALSAR University of Law, Hyderabad
Shameerpet**

Date: 29.05.2023

ADVERTISEMENT FOR THE POST OF MEDICAL OFFICER (FAMILY PHYSICIAN)

NALSAR University of Law, Hyderabad, a premier institution of national eminence in legal education and research is looking for qualified Medical Officer (Family Physician) for the University on contractual basis:

Essential Qualification:

- (i) M.B.B.S from a Medical College which is affiliated to the Health University of the concerned State and recognised by Medical Council of India
- (ii) He/She should be registered with a State Medical Council

Interested eligible candidates may apply latest by **12-06-2023 (by 5.00 p.m.)**. For further details and application form, please visit www.nalsar.ac.in

Experience: Candidates having experience will be preferred.

Salary is negotiable and will not be a constraint for qualified and well experienced candidates.

Medical Officer (Family Physician) will be required to visit the campus daily.

General information:

- (a) Only Indian Nationals are eligible to apply.
- (b) Age of the candidates must be below 65 years.
- (c) The engagement of the Medical Officer shall be purely on part time basis for a period of one year and may be terminated by either side by giving one month's notice.
- (d) Upon selection, the Medical Officer shall be required to attend to the patients of Health Centre as per the time schedule decided by the Vice-Chancellor of the University.
- (e) The Medical Officer shall be governed by the rules and regulations in force in the University from time to time.



NALSAR University of Law, Hyderabad
B.No.1, Justice City, Shameerpet, Medchal-Malkajgiri Dist. 500 101.
Ph : 040 – 23498104 / 115

Paste
recent
Passport-size
photograph

Application form for the post of MEDICAL OFFICER (FAMILY PHYSICIAN)

LAST DATE FOR RECEIVING THE COMPLETED FORM : June 12, 2023

- Name: _____
(in capitals)
- Father's / Mother's Name: _____
- Date of birth: Date: _____ Month: _____ Year: _____
- Nationality: _____ Do you belong to any special category.
(If yes indicate)
- Address for correspondence:

PIN: _____
- Phone / Mobile Number: _____ Email: _____
- Are you a retired Doctor? : Yes / No If yes, please give details
- Registration No.: _____
- Educational Qualifications (in chronological order from 10th standard onwards.)
(Enclose documentary evidence):

Course	Board/ University	Year of Passing	Class/Division	Percentage	Subjects

8. Experience (start from the current position) (Enclose documentary evidence)

Name and address of employer / institution	Designation	Responsibilities	Dates	
			From	To

9. Additional relevant information, if any, in support of your suitability for the said engagement, attach a separate sheet, if necessary:

10. References:

Referee 1: Name and address	Referee 2: Name and address
Ph:	Ph:
Email :	Email :

DECLARATION

The information furnished above is true to the best of my knowledge.

Signature: _____ Date: _____

Encl: List of enclosures.