



STATE INSTITUTE OF MEDICAL EDUCATION AND TECHNOLOGY (SI-MET)

(Under Government of Kerala)

Pallimukku, Pettah P.O, Thiruvananthapuram Kerala State – 695024

APPLICATION FORM FOR TEACHING POSTS

1	Name of the post applied for	:		
2	Notification Number and date	:		
3	Name and Address of the Candidate (Permanent)	:		
	Contact Address	:		
	Telephone (Land)	:		
	Telephone (Mobile)	:		
	Email ID	:		
4	Age & Date of Birth	:		
5	Gender		M/F	
6	Caste and Community	:	OBC/SC/ST	
6	Academic and professional qualification			
	Degree		University and Institution	Year of passing
				Percentage of marks
	B.Sc Nursing			
	M.Sc Nursing			
	Addl. Qualification:			
7	MSc Nursing Speciality	:		
8	Kerala Nursing Council Registration No. & Date and Registration of additional qualification	:		
9	Experience as on 07/11/2018			
a	Total experience :		Year	Month
	Clinical			Days
	SON			
	CON			
	TOTAL			
b	Total experience after MSc Nursing Degree		Year	Month
	Clinical			Days
	SON			
	CON			
	TOTAL			
c	Presently working or not ; if working name of post & Institution			
10	Challan remittance details			

DECLARATION

believe. Certified that the information furnished above is true to the best of my knowledge and

PLACE

SIGNATURE

:

DATE :

NAME OF CANDIDATE

: