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

(Under Government of Kerala)

TC No. 94/2750, Pattoor, Vanchiyoor P.O, Thiruvananthapuram – 695035

APPLICATION FORM

1	Name of the post	:	**LIBRARIAN**
2	Notification Number and date	:	No. E/2976/2025/SI-MET dated 01.08.2025
3	Name and Address of the Candidate with district and pin code (Permanent)	:	
4	Contact Address with district and pin code	:	
5	Telephone (Mobile)	:	;
6	Email ID	:	
7	Age & Date of Birth	:	
8	Gender		M / F/Others
9	Caste and Community	:	General / OBC/ SC/ST

10 Academic and professional qualification

Qualification	Board/ University/ Institution	Year of passing	Class/ Division /Grade

11 Experience

Posts held	Period		Total period	Organization	Nature of duties
	From	To			

12	Whether having Computer knowledge	:	YES/ NO
13	Fee remitted details with date of remittance		
14	Presently working or not		YES/ NO

DECLARATION

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

PLACE   SIGNATURE   :

DATE   :   NAME OF CANDIDATE   :