



THE GANDHIGRAM RURAL INSTITUTE
(Deemed to be University)

GANDHIGRAM - 624 302 :: DINDIGUL DISTRICT :: TAMIL NADU

Ministry of Education (Shiksha Mantralaya), Govt. of India
Accredited by NAAC with 'A' Grade (3rd Cycle)

**Walk-in-Interview Notification for
Recruitment of Medical Officer (Temporary)
Dr.T.S.Soundaram Health Centre, GRI**

Date : 08.01.2025 (Wednesday) Time : 11.30 A.M.

Venue : Board Room, Administrative Block of GRI

1. The Candidates are requested to provide original evidence of the particulars at the time of Walk-in-Interview without fail.
2. The Candidates are informed to download the Registration Form and bring the filled-in form at the time of Interview.

Qualification as per GRI Recruitment Rules

1. MBBS from a recognized University or Institution.
2. Registered with State Medical Council / Medical Council of India.

Preference:

Minimum 3 years work experience in a Reputed Hospitals / Universities / Health Centre.

| No. of post | Gender | Age | Consolidated Salary per month |
|--------------------|---|-------------------------|--------------------------------------|
| 01 | Male/Female (Preference will be given to the Female applicant) | Not exceeding 40 years. | Rs.60,000/- |

Medical Officer must stay in the GRI Campus.



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Registration Form

Walk-in-Interview on 08.01.2025 (Wednesday)

Dr.T.S.Soundaram Health Centre, GRI

Name of the Post: Medical Officer (Temporary)

| | | | | | |
|------|------------------------------|--|-----------------------------|-----------|--------------|
| 1. | Name of the candidate | | | | |
| 2. | Gender | Male <input type="checkbox"/> Female <input type="checkbox"/> | | | |
| 3. | Community | SC <input type="checkbox"/> ST <input type="checkbox"/> OBC <input type="checkbox"/> UR <input type="checkbox"/> | | | |
| 4. | Date of Birth | DD/MM/YYYY Age _____ | | | |
| 5. | Address for Communication | | | | |
| | | | | | |
| | | | | | |
| | Pin Code | | | | |
| | Cell No. | | | | |
| | E-mail. | | | | |
| | PAN | | | | |
| | Aadhar No. | | | | |
| 6. | Educational Qualification: | | | | |
| | Diploma/ Certificate Course | (_____ %) | | | |
| | 10 th | (_____ %) | | | |
| | 12 | (_____ %) | | | |
| | UG | (_____ %) | | | |
| | PG | (_____ %) | | | |
| | Technical Qualification | (_____ %) | | | |
| | Computer Knowledge | | | | |
| 7. | Details of Experience | | | | |
| | <i>Name of the Post</i> | <i>Name of the University / Institute / Organization</i> | <i>Period of service(s)</i> | | |
| | | | <i>From</i> | <i>To</i> | <i>Total</i> |
| | I. | | | | |
| | II. | | | | |
| III. | | | | | |

(Signature of the Candidate)

FOR OFFICE USE ONLY

The qualification and experience are mentioned in the notification are verified with the original certificates and found correct. He/she is eligible to attend the Interview.

1.
(Name & Signature)

2.
(Name & Signature)

3.
(Name & Signature)



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Name of the Post: Medical Officer (Temporary)

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|------|------------------------------|--|---------------------------------|------------------------------|-----------------------------|
| 1. | Name of the candidate | | | | |
| 2. | Gender | Male <input type="checkbox"/> | Female <input type="checkbox"/> | | |
| 3. | Community | SC <input type="checkbox"/> | ST <input type="checkbox"/> | OBC <input type="checkbox"/> | UR <input type="checkbox"/> |
| 4. | Date of Birth | DD.MM/YYYY Age _____ | | | |
| 5. | Address for Communication | | | | |
| | | | | | |
| | | | | | |
| | Pin Code | | | | |
| | Cell No. | | | | |
| | E-mail. | | | | |
| | PAN | | | | |
| | Aadhar No. | | | | |
| 6. | Educational Qualification: | | | | |
| | Diploma/ Certificate Course | (_____) | % | | |
| | 10 th | (_____) | % | | |
| | 12 | (_____) | % | | |
| | UG | (_____) | % | | |
| | PG | (_____) | % | | |
| | Technical Qualification | (_____) | % | | |
| | Computer Knowledge | | | | |
| 7. | Details of Experience | | | | |
| | <i>Name of the Post</i> | <i>Name of the University / Institute / Organization</i> | <i>Period of service(s)</i> | | |
| | | | <i>From</i> | <i>To</i> | <i>Total</i> |
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