



**THE INDIAN MEDICAL PRACTITIONERS'
CO-OPERATIVE PHARMACY & STORES LTD.,X-185,
34-37, KALKI KRISHNAMURTHY SALAI,
THIRUVANMIYUR, CHENNAI - 600 041**

PH.NO.044-24521029/24520189 Tele Fax: (044) 24523313
Website: www.impcops.org email ID: impcops@dataone.in

RECRUITMENT NOTICE

Applications are invited from the eligible candidates for the post of
“**MEDICAL SUPERINTENDENT (AYURVEDA)**” in our Society. The details are as
under:-

1	Name of the post	Medical Superintendent (Ayurveda)
2	No. of the Vacancy	1 (One Only)
3	Educational qualification <u>Essential:</u> <u>Desirable:</u> <u>Work Place at:</u>	A Pass in B.A.M.S., from recognized University by UGC. 1. Post Graduate Degree [M.D. (Ay)] in Draviya Guna 2. 5 Years Manufacturing experience. Manufacturing Unit, Tadepalle. A.P State
4	Post earmarked to	UR-1
5	Age	Maximum 35 years as on 01.06.2018
6	Salary	Rs.25,000/- (Consolidated Pay)

Candidates possessing the above qualifications may apply by downloading the application from our website and with D.D. for Rs.250/- drawn in favour of “**THE SECRETARY, IMPCOPS LTD.,**” payable at Chennai on any one of the Nationalized Bank giving full details along with Xerox copies of all the related Certificates and testimonials (with self attestation) **so as to reach the undersigned on or before 07.05.2018 by 4.00 P.M.** The applications shall be sent by Registered Post duly superscribed as “**APPLICATION FOR THE POST OF MEDICAL SUPERINTENDENT (AYURVEDA)**”. The date, time and the venue of interview will be intimated to eligible candidates in due course. Candidates shall appear for the interview at their own cost along with their original documents. The decision of the Management in this connection will be final.

(By order of the Board)

SECRETARY

APPLICATION FOR THE POST OF “ MEDICAL SUPERINTENDENT (AYURVEDA)” - MUT

1. Name of the candidate :
2. Father's/Husband's Name :
3. Age & Date of Birth
(as on 01.06.2018) :
4. Religion / Caste :
5. Community : UR
6. Educational Qualifications :
 - a) Academic
 - b) Technical
7. Previous Experience if any :
8. Address for communication with contact
Phone No. /e-mail :
9. Permanent Address with Contact
Phone No. :
10. Languages known :
11. Others, if any :

Passport
size Photo

I hereby certify that the details furnished above are true and correct.

Station:

Date:

Signature of the candidate

N.B. Attested Xerox copies of Certificate for age proof, Qualification, community and experience shall be enclosed along with this Application.