



**THE INDIAN MEDICAL PRACTITIONERS'  
CO-OPERATIVE PHARMACY & STORES LTD.**

34-37, KALKI KRISHNAMURTHY SALAI,  
THIRUVANMIYUR, CHENNAI - 600 041

PH.NO.044-24521029/24520189 Tele Fax: (044) 24523313

**RECRUITMENT NOTICE**

Applications are invited from the eligible candidates for the post of "**MASSEUR/  
THERAPIST (TRAINEE)**" in our Society. The details are as under:-

1	Name of the post	MASSEUR/ THERAPIST (TRAINEE)
2	No. of Vacancies	7
3	Educational qualification	A pass in 10 <sup>th</sup> Standard and Masseur Certificate course in Masseur training
4	Place of Work (Tranferrable)	<u>MALE</u> Puducherry – 1 Vijayawada – 1 <u>FEMALE</u> Impcops Hospital -3 Puducherry --1 Vijayawada –1
5	Reservation	<u>MALE</u> Puducherry – OBC Vijayawada – UR <u>FEMALE</u> Impcops Hospital - UR-1; OBC-1; SC-1 Puducherry – UR Vijayawada – UR
6	Age Limit	18-30 yrs as on 01.06.2021. The upper age limit will be relaxed 3 years for OBC and 5 years for SC/ST
7	Salary	Rs.500/- per day

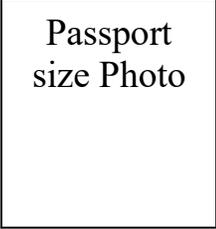
Candidates possessing the above qualifications may apply by downloading the application from our website along with D.D. for Rs.250/- drawn in favour of "IMPCOPS LTD.," payable at Chennai on any one of the Nationalized Bank giving full details along with Xerox copies of all the related Certificates and testimonials (with self attestation) **so as to reach the undersigned on or before 05.04.2021 by 4.00 P.M.** The applications shall be sent by Registered Post duly superscribed as "**APPLICATION FOR MASSEUR/THERAPIST (TRAINEE)**". 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 testimonials. The decision of the Management in this connection will be final.

(By order of the Board)

SECRETARY I/C

**APPLICATION FOR THE POST OF "MASSEUR/THERAPIST (TRAINEE)"**  
**(MALE & FEMALE)**  
**APPLIED FOR THE PLACE OF**

- |     |   |   |                                       |
|-----|---|---|---------------------------------------|
| 1.  | Name of the candidate                                       | : |                                       |
| 2.  | Father's/Husband's Name                                     | : |                                       |
| 3.  | Age & Date of Birth<br>(as on 01.06.2021)                   | : |                                       |
| 4.  | Religion  | : |                                       |
| 5.  | Community   | : | UR/OBC/SC/ST                          |
| 6.  | Educational Qualifications                                  | : |                                       |
|     | a) Academic   |   |                                       |
|     | b) Technical  |   |                                       |
| 7.  | Experience  | : |                                       |
| 8.  | Address for communication with contact<br>Phone No. /e-mail | : |                                       |
| 9.  | Permanent Address with Contact<br>Phone No.                 | : |                                       |
| 10. | Languages known   | : |                                       |
| 11. | Applied for the Place of                                    | : | Impcops Hospital,                     |
|     | Put ✓ mark  |   | Head Office / Puducherry / Vijayawada |
| 12. | Others, if any  | : |                                       |



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

Place:

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.