

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: impcopsx185@gmail.com

RECRUITMENT NOTICE

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

| 1 | Name of the post | PHARMACIST (TRAINEE) | | |
|---|--------------------------------------|--|--|--|
| 2 | No. of the Post | 1 | | |
| 3 | Educational qualification Essential: | A Pass in Higher Secondary (+2) Examination and Diploma in Pharmacy in Ayurveda or Siddha or Unani (D.Pharm) or A pass in Integrated Pharmacy in Siddha Ayurveda or Unani by any college or Institute recognized by Government | | |
| | Work Place at: | Head Office (Transferable) | | |
| 4 | Post earmarked to | OBC | | |
| 5 | Age | 18 -33 yrs as on 01.04.2023 | | |
| 6 | Salary | Rs.14,000/-(Consolidate) plus tea allowance as applicable | | |

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 "IMPCOPS LTD.," payable at Chennai on any one of the Nationalized Bank giving full detailsalong with Xerox copies of all the related Certificates and testimonials (with self attestation) so as to reach the undersigned on or before 15.02.2023 by 4.00 P.M. The applications shall be sent by Registered Post duly superscribed as "APPLICATION FOR THE POST OF "PHARMACIST (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 documents. The decision of the Management in this connection will be final.

(By order of the Board)

SECRETARY JOSEP

<u>APPLICATION FOR THE POST OF</u> "PHARMACIST (TRAINEE)"

| 1. * | Name of the candidate | • | | Passport |
|---------|--|--------------|----------------------|------------|
| 2. | Father's/Husband's Name | : | | size Photo |
| 3. | Age & Date of Birth (as on 01.04.2023) | : | | |
| 4. | Religion | : | | |
| 5. | Community | : OC/OBC/SC | C/ST | |
| 6. | Educational Qualifications | | | |
| | a) Academic : Essential | ** | | |
| | Additional | 1 | | |
| | b) Technical | | | |
| 7. | Experience | | | |
| 8. | Address for communication with contact Phone No. /e-mail | b | | |
| 9. | Permanent Address with Contact Phone No. | : | | |
| 10. | Languages known | | | |
| 11. | Others, if any | | | |
| | | | | |
| I herel | by certify that the details furnished above | are true and | correct. | |
| Statio | n: 🛫 | 940 | | |
| | | | | |
| Date: | | | Signature of the car | ndidate |

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