



ಮಾನವಸಂಪನ್ಮೂಲವಿಭಾಗ/ಮಾನವ ಸಂಸಾಧನ ಅನುಭಾಗ/HUMAN RESOURCES SECTION  
ಭಾರತೀಯವಿಜ್ಞಾನಸಂಸ್ಥೆ/ಭಾರತೀಯ ವಿಜ್ಞಾನ ಸಂಸ್ಥಾನ/INDIAN INSTITUTE OF SCIENCE  
ಬೆಂಗಳೂರು/ಬೆಂಗಳೂರು/ BANGALORE - 560012  
ದೂರವಾಣಿ/ದೂರಭಾಷ/ TELEPHONE : 2293 2231 / 2232 / 2941  
ಇ-ಮೇಲ್/E-mail/ईमेल : office.hr@iisc.ac.in

### **ENGAGEMENT OF DOCTORS ON CONTRACT BASIS**

#### **A. Details of the Posts, Essential qualifications and Remuneration**

SI No.	Post	No. of Vacancies	Mandatory Qualification	Remuneration Per Month
1.	Contract Medical Officer	02(UR)	MBBS with Valid registration at State Medical Council or Medical Council of India with minimum one year relevant experience	Rs.40,000/-+ HRA
<b>Total Post</b>		<b>02</b>		

#### **Note:**

- There is no maximum age limit for eligibility.
- The Candidate must possess the essential prescribed qualifications as well as a valid registration with the concerned statutory authority (wherever applicable) on or before the last date of submitting application.
- Qualifications other than one prescribed in this advertisement will not be accepted.
- Qualifications acquired from foreign university will also not be accepted.
- Where the posts specified in this advertisement are not reserved for any category, a reserved category candidate can also apply, provided he/she fulfills the criteria specified for the post. However, he/she shall be treated at par with Unreserved category candidates.
- The scope includes working on shifts in day/night on rotation.

#### **B. How to Apply**

a) Candidates need to send the filled-in application form (in pdf format) along with other relevant documents to the email address [office.estb@iisc.ac.in](mailto:office.estb@iisc.ac.in) from **28.08.2021 to 11.09.2021**.

Applications received after the cut-off date will be rejected.

- b) The following relevant documents required to be sent (in .pdf format only) along with the filled-in application:
- i. Educational qualification documents i.e., SSLC, MBBS certificates,
  - ii. MD/MS Certificates (if applicable),
  - iii. Medical Council of India/State Council Registration certificate,
  - iv. Identity proof, Address Proof,
  - v. No Objection Certificate (NOC) from existing employer, if any (in case of Govt./PSU employees) and
  - vi. Experience certificate, if any, in pdf format only.
- c) The shortlisted candidates will be informed through e-mail about date & time of interview. Candidates are also advised to provide correct information in their online application.
- d) The electronic mode of interview (Zoom Call/ Microsoft Team) will be intimated to the candidates in advance. However, the candidates are advised to be prepared to give interview in all the medium mentioned here, and to appear in person, if so required
- e) Candidates may please ensure that they are fulfilling all the requisite criteria prior to registering, failing which, their candidature is liable to be rejected/cancelled.

**C. General Instructions:**

- i. Engagement is purely temporary on contract basis for a period of one year and renewable based on the requirement of the Institute. Contract tenure will commence from the date of joining. The waitlist will be operational for one year. The number of positions may increase depending on the requirement.
- ii. Engagement on contract would be subject to medical fitness.
- iii. The contract can be terminated at anytime by giving one month's notice, by either side.
- iv. Candidature/contract of candidate(s) submitting false certificates or suppression/submission of incorrect information shall be liable for termination/disqualification/rejection at any stage.
- v. Only Indian nationals need apply.
- vi. In case the interview is held in-person, no TA/DA shall be paid for attending the interview. However, interview may be held through online method such as Google Meet/Zoom Call/ Microsoft Team/ Skype. Candidates will be informed through email/about mode and details of interview.

Date :26.08.2021

Sd/-  
**Registrar**



# Indian Institute of Science

Bangalore 560 012, INDIA.

Please affix  
your latest  
photograph

**1. Name in Full**

First Name

Middle Name

Last Name

**2 Sex**

MALE

FEMALE

OTHERS

**3. Marital Status**

MARRIED

SINGLE

**4. Date of Birth:**

D D M M Y Y Y Y

**5.MCI reg. No.**

**5. Address:**

Present

Permanent

**6. Mobile Telephone No**

**7. Telephone (Office)**

**8. Telephone (Residence)**

**9. Telephone (Fax)**

**10. Email Id:**

**11. (a) Category (UR/OBC/SC/ST/EWS)**

**(b) Attested copy of certificate enclosed**

YES

NO

**(c) Whether Physically Challenged**

YES

NO

**(d) If Yes! tick mark the appropriate category**

OH

HH

VH

**12. Academic record starting with Matriculation:** (please attach photocopies of degree certificates)

Degree	College / University / Institute	Year of Joining	Year of Leaving	Percentage of marks	Class / Division

**13. Experience**

Employer	Position held	Date of Joining	Date of Leaving	Pay with Scale of pay

**14. Professional Training Received**

Year	Nature of Training	Duration	Organization where training was provided

**15. Details of Experience**

Position	Nature of duties and achievements

16. I hereby declare that I have carefully read and understood the instructions and particulars supplied to me, and that all entries in this form as well as the attached sheets are true to the best of my knowledge and belief.

There are attached  sheets along with this form.

Date :

Place :

.....  
(Signature of Applicant)

Filled in form may be mailed to **The Asst Registrar (HR),  
Indian Institute of Science,  
Bengaluru 560012, INDIA**

Telephone : 080-22932231  
Fax : 080-23600757