



TAMIL NADU NATIONAL LAW SCHOOL

(An University established by Tamil Nadu Act No.9 of 2012)

Dindigul Main Road, Navalurkuttappattu, Tiruchirappalli 620 009, Tamil Nadu, India

Phone: Off 0431-2692101; e-mail: v.c.tnnls@gmail.com www.tnnls.in

Lr.No. 1201-2/REGR/TNNLS/2017

Date: 12.06.2017

NOTIFICATION

Further to this Office Letter No. 1201-1/REGR/TNNLS/2017 date 01.06.2017, the last date for receipt of filled-in application for the post of Resident Medical Officer is extended upto 21.06.2017.

Interested candidates may send the prescribed application to "The Vice-Chancellor, Tamil Nadu National Law School, Dindugul Main Road, Navalurkuttapattu, Tiruchirappalli 620 009" so as to reach latest by 21.06.2017.


Deputy Registrar



TAMIL NADU NATIONAL LAW SCHOOL

(A State University established by Act No.9 of 2012)

Navalurkuttappattu, Srirangam Taluk, Dindigul Main Road, Tiruchirappalli – 620 009, Tamil Nadu, India
Phone Off: 0431-2692000/2692111; Fax: 2692099; E-mail : registrar@tnnls.in ; Website: www.tnnls.in

Application form for the Post of Resident Medial Officer

Name of the candidate (in BLOCK letters)	:	_____	Affix here the recent passport size Photograph Do not staple
Gender	:	_____	
Date of Birth	:	_____ Age _____	
Category (Please attach the self-attested copy of certificate for SC, ST& OBC)	:	_____	
Marital Status	:	_____	
Father's Name	:	_____ Present Occupation: _____	
Address for Communication	:	_____	
	:	_____	
	:	_____ District _____ Pin Code _____	
E-Mail ID (Mandatory)	:	_____	
Mobile No (Mandatory)	:	_____	

Educational Qualification (Start from SSLC / 10th Standard)

Degree / Diploma/ HSC	Discipline	Name of the Institution / University	Class	% of Marks	Month & Year of Passing

Work Experience (in Chronological order up to the present post)

Organization	Designation	From	To	Salary

Language Known:

Computer Knowledge:

Any other relevant information:

Nature of activities carried out in current or recent:

Declaration

I hereby declare that the information given above is correct to the best of my knowledge and belief.

Place:

Signature of Applicant

Date: