



UNIVERSITY OF MADRAS

NOTIFICATION

Applications are invited for the post of 'Veterinary Surgeon,' in the rank of Assistant Surgeon (one post), for Animal Houses at the Taramani/Guindy Campuses, **UNIVERSITY OF MADRAS**, Candidates with the prescribed academic qualification/experience and age limit only need to apply.

The filled in application form (5 sets) along with the prescribed fee of Rs. 500/- (**Rs. 250/- for SC/ST candidates**) through a Demand Draft obtained from any Nationalized Bank drawn in favour of the "Registrar, University of Madras" payable at Chennai **should be submitted on or before 14.07.2014.**

- (i) Basic Qualification : B.V.Sc. Degree
- (ii) Additional Qualification : Must be a Registered Veterinary Practitioner under the Indian Veterinary Council Act-1984 (Central Act 52 of 1984).
- (iii) Experience : Nil
- (iv) Age Limit (as on 01.07.2014) : 30 years
1. No maximum age limit for SCs, SC (Arunthathiar), STs, MBCs/Dcs, BCs, BCMs and DW of all castes.
2. Candidates not belonging to SCs, SC(A)s, STs, MBC/DCs, BCs and BCMs (i.e. others), who have put in 5 years of service in the State/Central Govt., are not eligible to apply even if they are within the age limit.
- (v) Scale of Pay : Rs. 9300-34800 Grade Pay Rs. 4700/-
- (vi) Maximum age for Superannuation : 58 years

The appointee will be governed by the Contributory Provident Fund Scheme.

The Syndicate reserves the right to fill or not to fill up the post without assigning any reasons whatsoever.

REGISTRAR

Chennai
Date:



UNIVERSITY OF MADRAS

Affix passport size
photograph here

1. Name (in block letters) :
2. Address to which communications are to be sent (indicate the correct address with Pin-code, Telephone, Mobile numbers and e-mail ID) :
3. Sex :
4. Nationality & Religion :
5. Date of birth and age as on 01.07.2014 : **D M Y AGE (years)**
(Attested copy of the first page of SSLC book to be enclosed)
6. Community (GT/SC/ST/MBC/DNC/BC) :
(Certificate from the Revenue Officials to be enclosed)
7. Qualifications (Attested copies to be enclosed)
(i) Academic Qualification : Degree/year of passing/
percentage of marks
(ii) Additional Qualification :
8. Name and address of not less than two Persons (not related by blood or marriage) from whom you have obtained and enclosed your testimonials. Two are needed of which one should be from the Head of the Institution last attended. :
9. Any other information :

I declare that the statements made in this application are true and authentic for which I take the responsibility.

Place:

Date:

SIGNATURE OF THE APPLICANT.