NIZAM'S INSTITUTE OF MEDICAL SCIENCES

(A University established under the State Act)

PUNJAGUTTA::HYDERABAD

Rc.No:HR1/429/2026/R. Date: 24-11-2026

WALK IN INTERVIEW

1) Applications are invited from the eligible Candidates along with a registration fee of Rs.5000/-to be paid through online at NIMS Academic account No.50200082261426, HDFC Bank, IFSC Code No. HDFC0004290, for filling up the posts of Medical Officers in Emergency Medicine Department.

2) The required qualifications for Medical Officer:

Sl.	Department	Qualification	Designation
1	Emergency Medicine	MBBS	Medical Officer

3) The other details of Application form can be downloaded from the institute website www.nims.edu.in. **All the Aspirants for Medical Officers should provide Power point presentation of their academic and experience. Limited to 5 slides.**

i) The eligible qualification should be recognized by the National Medical Commission.

ii) Applications of the candidates who do not fulfill the required qualification & Experience and not submitted other necessary documents will be rejected summarily and no Correspondence shall be entertained.

iii) For Medical Officers a consolidate salary of Rs.50, 000/- per month.

4) Candidates, interested may attend for Walk in Interview with filled in application down load from the Institute website www.nims.edu.in.

5) The Institute reserves the right to fill up or not to fill up the posts notified. Walk in interviews will be conducted on 04-12-2026 before 11.00 am to 12.00 noon for Medical Officers in the Board Room 1st Floor, NIMS, Hyderabad. **Candidates have to report to the HR1 Section by 9.30 am on 04-12-2026.**

Sd/-

DIRECTOR

NIZAM'S INSTITUTE OF MEDICAL SCIENCES

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PUNJAGUTTA :: HYDERABAD 500 082, T.S.

APPLICATION FORM FOR MEDICAL OFFICERS

Affix self-attested Latest pass port Size photograph

Application Number_____

Post Applied for: _____

Department: _____

1. Full Name (in block letters) : _____ _____
   Surname Name
2. Father's Name :
3. Spouse's Name :
4. Date of Birth :
5. Marital Status : Married / Unmarried
6. Full Postal Address

Permanent Address	Present address for communication

7. Social Status :
8. Place of Birth :

9. Telephone No. : STD Code: _____ Tel. No: _____ Mobile _____

10. Email ID: _____

11. Place of Schooling : 1st class to 10th class

Sl.No	Class	Name of the School Studied	Place of study	Period of Study
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

12. Examination passed including graduate examination. (Enclose Xerox copies).

Name of the examination	Name of the College & University	Month & Year of passing the examination	MCI Recognition status	a) Class / Division b) Distinction or prize, If any, in any or more subjects
M.B.B.S.				
Other qualifications if any				

13. Pan Number:

Signature of the Applicant

PARTICULARS OF ENCLOSURES:

14. X Class or equivalent Certificate
15. Study and Conduct Certificate of MBBS from the Principal of the College where studied.
16. MCI Recognition status.
17. Permanent Telangana Medical Registration Certificate
18. Provisional or Final MBBS Degree Certificate
19. No Objection Certificate from Employer (if applicable).
20. Experience if any.
21. Performance report from the previous employer,(if applicable)