# GOVIND BALLABH PANT INSTITUTE OF

### **POSTGRADUATE MEDICAL EDUCATION & RESEARCH (GIPMER)**

(GOVT. OF NCT OF DELHI)

1, J.L. NEHRU MARG, NEW DELHI-110002(INDIA)
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(ADMINISTRATION BRANCH)

F.56/GIPMER/INTERVIEW/SR/ESTT/3034-51

Dated:09/03/2020

#### INTERVIEW NOTICE FOR POST OF SENIOR RESIDENTS ON REGULAR BASIS AT GIPMER

Accordingly, interview for the vacant post of **Senior Resident** in the under mentioned respective departments of this institute will be held **on 30.03.2020 (Monday), 31.03.2020 (Tuesday) & 01.04.2020 (Wednesday) at 02.00 PM onwards** in the Auditorium/Seminar Hall near gate no.-2 of GIPMER. The applications in the prescribed format, as per Annexure-I must be submitted at Counter 17 of Administration Branch of the Institute alongwith prescribed fee on or before **26.03.2020(Thursday) upto 04.00 PM**. No application shall be entertained without the prescribed fee & after the abovesaid due date & time.

Details of vacant posts and likely to be vacant posts of Senior Residents in various specialties of this Institute are as under:-

| S.NO. | Name of Department | General | SC | ST | ОВС | Total  | Date time and venue    |
|-------|--------------------|---------|----|----|-----|--------|------------------------|
|       |                    |         |    |    |     | Vacant | for interview          |
| 1.    | Cardiology         | 16      | 06 | 03 | 12  | 37     | 30.03.2020 at 2:00PM   |
| 2.    | CTVS               | 02      | 01 | -  | 01  | 04     | in the Auditorium/     |
| 3.    | Gastroenterology   | 05      | 01 | 01 | 02  | 09     | Seminar Hall near      |
| 4.    | G.I.Surgery        | 03      | 01 | -  | 02  | 06     | gate no02 of GIPMER    |
| 5.    | Neurology          | 04      | 02 | 01 | 03  | 10     | 31.03.2020 at 2:00PM   |
| 6.    | Anaesthesia        | 13      | 06 | 02 | 12  | 33     | in the Auditorium/     |
| 7.    | Blood Bank         | 01      | -  | -  | -   | 01     | Seminar Hall near      |
| 8.    | Radiology          | 07      | 02 | 01 | 03  | 13     | gate no02 of<br>GIPMER |
| 9.    | Pathology          | 03      | 01 | -  | 01  | 05     | 01.04.2020 at 2:00PM   |
| 10.   | Biochemistry       | -       | 01 | -  | 01  | 02     | in the Auditorium/     |
| 11.   | Microbiology       | -       | 01 | -  | 01  | 02     | Seminar Hall near      |
| 12.   | Psychiatry         | 02      | 01 | -  | 02  | 05     | gate no02 of GIPMER    |
|       |                    | 56      | 23 | 08 | 40  | 127    |                        |

Note: The Number of posts is indicative and may vary depending on vacancies at the time of interview and subject to change without any notice.

**Qualification**: - The applicant must have passed MBBS with P.G Degree or Diploma in the concerned specialty from a Recognized University/Institution and should be registered with the **Delhi Medical Council**. For SR Cardiology eligibility condition is MD/DNB in Medicine/Paediatric/Chest Medicine.

<u>Note</u>: - If Selected, candidates should produce DMC Certificate with P.G Qualification before joining. Those candidates who have applied for registration to DMC shall not be allowed to join merely on production of DMC fee receipt.

Pay Band: - Rs 67,700/- plus usual allowances as admissible under the rules.

The selected candidates may have to make it convenient to join within 07 days of date of issue of offer letter/ Memorandum.

#### **Age Limit**

40 years (01.03.2020), relaxable by 5 years for qualified Ex-Service personnel with a continuous service of not less than 5 years, SC/ST candidate.

#### Note:-

- 1. Appointment will be subject to medical fitness and verification of Certificate(s) of educational qualification/age/caste/DMC registration.
- 2. The vacancies are likely to vary and may be filled in phases.
- 3. Panel of wait listed candidates will be prepared separately.
- 4. No TA/DA will be paid for appearing in the aforesaid interview.
- 5. The appointment and services of selected SR's will be governed under Residency Scheme.
- 6. In case, interview cannot be completed on the scheduled date/duration the same shall be conducted on the following working day.
- 7. No correspondence or personal enquiries shall be entertained.
- 8. Bring all original documents along with their self attested photocopies on the scheduled date of Interview & on the date of joining to the post.
- FEES PAYABLE:- Rs.300/-(Non-Refundable) in the form of Cash/Demand Draft issued by a nationalized bank in favour of *MEDICAL SUPERINTENDENT, G.B.PANT HOSPITAL*, payable at New Delhi. The eligible candidate can deposit the fee (in cash) to the Cashier at Accounts Branch of this Institute.
- 10. The Candidates are advised to check the Institute website regularly for any/further updation in the matter.
  - JURISDICTION OF DISPUTE: In case of any Legal dispute, the jurisdiction of Court will be Delhi/New Delhi only.
  - > Note: The application form is available at the Institute's website <a href="mailto:gbpant.delhigovt.nic.in">gbpant.delhigovt.nic.in</a>.

-sd-ADMINISTRATIVE OFFICER Dated:-

F.56/GIPMER/Interview/SR/Pt. File-II/Estt/

Copy forwarded to the following for information and further n.a. to:-

- 1. The Dean, MAMC, GNCT of Delhi with the request to make arrangement to place the above notice on the notice board of your College.
- 2. The Medical Superintendent, Lok Nayak Hospital, GNCT of Delhi with the request to make arrangement to place the above notice on the notice board of your Hospital.
- 3. The Head of Department, Cardiology, GIPMER, New Delhi.
- 4. The Head of Department, Neurology, GIPMER, New Delhi.
- 5. The Head of Department, Gastroenterology, GIPMER, New Delhi.
- 6. The Head of Department, Biochemistry, GIPMER, New Delhi.
- 7. The Head of Department, CTVS, GIPMER, New Delhi.
- 8. The Head of Department, GI Surgery, GIPMER, New Delhi.
- 9. The Head of Department, Anaesthesia, GIPMER, New Delhi.
- 10. The Head of Department, Psychiatry, GIPMER, New Delhi.
- 11. The Head of Department, Radiology, GIPMER, New Delhi.
- 12. The Head of Department, Blood Bank, GIPMER, New Delhi.
- 13. The Head of Department, Microbiology, GIPMER, New Delhi.
- 14. The Head of Department, Pathology, GIPMER, New Delhi.
- 15. The PS to Medical Director, GIPMER, New Delhi.
- 16. The Incharge (Server Room), GIPMER with the direction to upload the notice alongwith annexure on the website of the institute immediately.
- 17. The Notice Board of the Administration Branch, GIPMER, New Delhi.
- 18. The Incharge Auditorium with the request to book the Auditorium on the above mentioned days/dates.

## **ANNEXURE-I**

## **APPLICATION FORM FOR THE POST OF SENIOR RESIDENT**

## DEPARTMENT

| 1. Name  | [                 | Paste your<br>latest passport |                                     |                |                    |                       |
|----------|-------------------|-------------------------------|-------------------------------------|----------------|--------------------|-----------------------|
| 2. Fathe |                   | size<br>photograph            |                                     |                |                    |                       |
| 3. Corre | spondence Add     | ress ( <b>In I</b>            | Block                               |                |                    | duly self<br>attested |
| Letters  | )                 |                               |                                     |                |                    |                       |
| 4. Perma | anent Address:    |                               |                                     |                |                    |                       |
| 5. Mobil |                   |                               | andatory):                          |                |                    |                       |
| 6. Email | address:          |                               |                                     |                | _                  |                       |
| 7. Date  | of Birth (Proof t | o be encl                     | osed):                              |                |                    | _                     |
| 8. Prese | nt Age (as on ir  | nterview o                    | date):                              |                |                    |                       |
| 9. Educa | ational Qualifica | tion: (Atto                   | ested Copies of the cer             | tificates to I | be enclosed):      | :-                    |
| S.No:-   | Exam<br>Passed    | Year                          | Board/University                    | % of marks     | No. of<br>Attempts | s                     |
| 1.       |                   |                               |                                     |                |                    |                       |
| 2.       |                   |                               |                                     |                |                    |                       |
| 3.       |                   |                               |                                     |                |                    |                       |
| 4.       |                   |                               |                                     |                |                    |                       |
| 5.       |                   |                               |                                     |                |                    |                       |
| 11. Del  | _                 | cil Regist                    | DBC (copy of certificate ration No: |                | •                  |                       |

13. Whether worked as Senior Resident on Adhoc/Regular basis: Name of the Worked **Period of appointment** Specialty in Institution which worked as To From 14. Date of Passing of M.D/M.S/M.B.B.S 15. Details of Publications: -16. Conference attended: - \_\_\_\_\_\_ 17. Details of the Demand Draft: - \_\_\_\_\_\_ Demand Draft/TR-V No. Date Of Issue Name of the issuing Bank (Note:-Candidate must write his/her Name applied for on the reverse side of the demand draft/TR V.) I hereby solemnly declare and affirm that the above statements made by me are correct and complete to the best of my knowledge and belief. I understand that in the event of any information/fact being found untrue/false/incorrect my candidature is liable to be cancelled /terminated besides taking any other action deemed fit in this regard. I shall abide by the terms and conditions as prescribed. I have / haven't done my Senior Resident Residency earlier, as mentioned above in col. 12. Date\_\_\_\_\_ Place Details of Enclosures: Name:-

Signature of the Candidate:-