

### **DELHI STATE CANCER INSTITUTES**

-centres par excellence in the service of humanity
(A group of autonomous institutions under the Govt. of NCT of Delhi)

EAST: DILSHAD GARDEN, DELHI 110095

EPABX:+91-11-22135200,22135700FAX:+91-11-22110505

WEST: C-2/B, JANAK PURI, NEW DELHI

110058EPABX:+91-11-25501111,25541111FAX:+91-11-25549999



# RECRUITMENT NOTICE ADVERTISEMENT NUMBER - RECTT/12/2024

|     | WALK-IN-INTERVIEW (Ad-hoc)                              | Market 18 | Same and the second |
|-----|---|-----------|---------------------|
| SNO | SPECIALITY  | POSTS     | Upper Age Limit     |
|     | ant Professor   |           |                     |
| i.  | Specialist Grade-III in Onco-Imaging / Radiodiagnosis   | 01        |                     |
|     | Pay Matrix Level -12, Rs. 1,01,500/- + Usual Allowances |           | 55 Years            |
| ii. | Specialist Grade-III in Nuclear Medicine                | 01        |                     |
|     | Pay Matrix Level -12, Rs. 1,01,500/- + Usual Allowances |           |                     |

WALK IN INTERVIEW for ad-hoc appointment for 44 Days (with one day usual break) in above disciplines are scheduled as per details given below. Additional candidates if qualified may be kept on panel for future requirements. Desirous candidates, possessing requisite qualifications may report for PERSONAL INTERVIEW to the Admin Block at DSCI (East) on dated 10.01.2025 (Friday) at 09:00 AM to 10:00 AM along with their resume, colored passport size photograph and copies of relevant certificates (Original Certificates should also be brought for scrutiny).

#### **ELIGIBILITY CRITERIA:**

| <b>Educational Qualification</b> | & | Experience | for | eligibility: |
|----------------------------------|---|------------|-----|--------------|

#### Essential for General discipline/ Broad Speciality:

#### Specialist Grade-III

- (i) A recognized MBBS degree qualification included in the First Schedule or Second Schedule or Part II of the Third Schedule (other than licentiate qualifications) to the Indian Medical Council Act, 1956). Holders of Educational qualifications included in Part II of the Third Schedule should also fulfill the conditions specified in sub-section (3) of section 13 of the Indian Medical Council Act, 1956 (102 of 1956).
- (ii) Post-Graduate degree or Diploma in the concerned Speciality from recognized Institute.

**Experience:** Three years' experience in the concerned Speciality or Super Specialty after obtaining the first Post graduate degree or 5 years' experience after obtaining the Post graduate Diploma.

DIRECTOR, DSCI

#### Note:

- > The number of Posts in categories can vary at the time of final selection.
- > All Candidates must bring the original documents for consideration.
- > No TA/DA shall be paid for attending the interview.
- > The arrangement is being made as an Interim step against the reserved category posts in the field of Assistant Professors. As and when regular incumbent joins against the posts in this recruitment drive, he/she shall be relieved from the post immediately.
- > The qualifications are relaxable at the discretion of the Selection Committee / DSCI, for reasons to be recorded in writing, in case of candidates otherwise well qualified.

#### THE TERMS & CONDITIONS OF APPOINTMENT WILL BE AS MENTIONED BELOW:

#### 1. Tenure:

Initial appointment is for 44 days, which can be extended for further 44 days by giving one day break after receiving written request from the concerned Branch In-charge/ HOD, which is duly recommended & forwarded by the Director, DSCI or till regular incumbents join whichever is earlier.

#### 2. Pay & Allowances:

Pay Matrix Level -12, Rs. 1,01,500/- + Usual Allowances.

#### 3. Medical Examination:

The Selected candidates have to submit certificate of fitness from a registered medical practitioner within 7 days of joining at this Institute.

#### 4. Private Practice:

The Private of any kind what so ever is strictly prohibited. Beside the candidates will not work simultaneously in any other hospital. Breach of this condition will result in termination of appointment & necessary proceedings may also be initiated in consultation with DMC for cancellation of certificate of Registration.

#### 5. Registration:

He/she must have valid registration certificate issued by Delhi Medical Council or should have applied for DMC on or before the date of interview.

#### 6. Discipline:

He/she will have to wear white coat on duty with the name badge. He/She will not smoke on duty or examining patients.

#### 7. Certificate:

Experience certificate will only be issued after the NO DUES CERTIFICATE from all concerned along with leave record.

#### 8. Leave Entitlement:

The leave admissible to the Ad-HOC Specialist Grade-III will be 3 ½ days paid leave for 44 days of service rendered by them. In case of unauthorized /wilful absence of duties for more than 7 days, the appointment shall be terminated without assigning any reason. No salary will be paid for any kind of unauthorized absence from duty even by the name of Strike. Further, while issuing the experience certificate the period of unauthorized absence/strike period will be mentioned in it.

#### 9. The appointment will be further subject to:

- a). The production of certificates of fitness from the resident medical practitioner.
- b). Submission of attested copies of all the certificates of appointment he/she will be required to take an oath of allegiance to constitution of India to take solemn affirmation to the Office in the prescribed Performa.

#### 10. Resignation/Termination:

The appointment can be terminated at any time, from either side, by giving seven days prior notice otherwise are required to deposit Seven days salary in lieu of the prior notice. In case, further extension is not required, the same may be informed seven days before the last day of tenure (i.e.44<sup>th</sup>days) otherwise seven days salary may be deposited in lieu of the prior notice.

In case of unsatisfactory work and conduct report, the adhoc appointment shall be

terminated and no correspondence shall be entertained in this regard. If termination of services is made due to continue absence of the appointee, on disciplinary grounds, Seven days salary shall be deducted from his/her salary.

- 11. All the Selected candidates shall have to attend a compulsory training on BIO- MEDICAL WASTE MANAGEMENT and CLS. For venue and schedule of the programmed, must contact I/C Bio-Medical Waste, DSCI.
- 12. The candidates should not have been involved in any criminal proceedings by any Court of Law.
- 13. Other condition of service will be governed by relevant rules and orders from time to time: If any declaration given or information furnished by him/her found to be false or if he/she is found to have willfully suppressed any material, facts/information he/she is liable to be removed from services and such other action as Govt. may deem necessary.

#### Note:-

- **1.** The candidature for selection will be accepted on submission of valid 'applied for DMC' for PG within the stipulated period, subject to provision of passing out certificate.
- 2. Candidates already working in other organization/hospital are required to submit relieving order from concerned organization/hospital before joining. Without the relevant documents, no acceptance/joining to the post of Assistant Professor will be allowed under any circumstances.
- 3. He/she is required to report for acceptance of offer letter within 7 days of issue of this letter in the Admin Branch, Delhi State Cancer Institute, Dilshad Garden, Delhi 110095, failing which offer of appointment will stand cancelled/withdrawn suo-moto considering that the candidate is not interested. No claim or request for extension of period to join will not be entertained after the cancellation of offer of appointment.

# DELHI STATE CANCER INSTITUTE COPT. OF MET OF DELT

**Post Applied For** 

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Affix recent

passport size

11-25501111,255411111FAX:+91-11-25549999
Website:dsci.delhi.gov.inE-mail:director.dsci@nic.in

## APPLICATION FOR RECRUITMENT OF SPECIALIST GRADE-III FOR 44 DAYS ON ADHOC BASIS

| 2.        | Name of the Ap                      | plican   | t (Dr/Mr/Mis       | s/Mrs)      | :                    |       |                     |           | photograph<br>here |
|-----------|-------------------------------------|----------|--------------------|-------------|----------------------|-------|---------------------|-----------|--------------------|
| 3.        | Date of Birth                       |          |                    |             | :                    |       |                     |           |                    |
| 4.        | Father's/Husbar                     | nd's N   | ame                |             | :                    |       |                     |           |                    |
| 5.        | Address (with P                     | in Co    | de)                |             | :                    |       |                     |           |                    |
|           |                                     |          |                    |             |                      |       | Pin (               | Code      |                    |
| 6.        | Contact Number                      | (with \$ | STD Code)          |             | :                    |       |                     |           |                    |
| 7.        | E-mail Address                      |          |                    |             | :                    |       |                     |           |                    |
| 8.        | Category to whi                     |          |                    |             | :                    |       |                     |           |                    |
| 9.        | Academic/Tech<br>(matriculation onw |          |                    |             |                      |       |                     |           |                    |
| S.<br>No. | Name of Exar                        | n        | Year of<br>Passing |             | University/<br>Board |       | v./ Class/<br>Grade | Subject   | (%) of<br>Marks    |
|           |                                     |          |                    |             |                      |       |                     |           |                    |
|           |                                     |          |                    |             |                      |       |                     |           |                    |
|           |                                     |          |                    |             |                      |       |                     |           |                    |
|           |                                     |          |                    |             |                      |       |                     |           |                    |
| 10.       | Experience (atta                    | ch phot  | tocopies of ce     | ertificates | in support o         | f exp | perience)           | :         |                    |
| S.        | Name of                             |          | Period             | _           | Designation          |       | Pay                 | Nature of | Reason for         |
| No.       | Employer/Org.                       | Fro      | om                 | То          |                      |       | Scale/Pay           | Duties    | leaving            |
|           |                                     |          |                    |             |                      |       |                     |           |                    |
|           |                                     |          |                    |             |                      |       |                     |           |                    |
|           |                                     |          |                    |             |                      |       |                     |           |                    |
|           |                                     |          |                    |             |                      |       |                     |           |                    |

| 11. | Any other information   | :  |         |                          |
|-----|---|----|---------|--------------------------|
| 12. | Registration No (DMC/Others, as applicable)   | :  | No      | Valid upto               |
| kno | nereby, declare that the information given in appli<br>owledge and belief. In the event of any inform<br>ndidature/appointment shall be liable to be rejected | na | tion be | ·                        |
| Da  | ite:  |    |         |                          |
| Pla | ace:  |    |         | (Signature of Candidate) |