GOVT OF NCT OF DELHI
GOVIND BALLABH PANT INSTITUTE OF
POST GRADUATE MEDICAL EDUCATION & RESEARCH
(GIPMER)
1,J.L. Nehru Marg, New Delhi – 110002
Tel. No.+91-11-23233001, 23234242
Email: academiccellgipmer@gmail.com Website: gbpant.delhigovt.nic.in

DIAMOND JUBILEE YEAR

F NO 56/Academic Cell/GIPMER/2022/PDCC-2026-27Pt. File/ 986 Dated: 18/11/2026.

Notice for Post Doctoral Fellowship & Certificate Courses

The Health & Family Welfare Department, Govt. of NCT of Delhi invites application from eligible candidates in prescribed format for filling up of 12 Seats for Post Doctoral Fellowship and Post Doctoral Certificate Courses in different specialties in G. B. Pant Institute of Post Graduate Medical Education and Research (GIPMER). The details of seats are given below. The application complete in all respect must reach the office of the Registrar Academic Cell,D Block, 5th Floor, GIPMER New Delhi-110002, GB Pant Institute by 14th **December 2026 up to 5:00 PM.** The format of application, eligibility criteria and other details are available on the website of this institute i.e. http://gbpant.delhigovt.nic.in. Incomplete application shall be summarily rejected. Interview shall be held on **17th and 18th December 2026 at 10:00 AM** at this institute. Detailed schedule of the interview is available on the website of the institute.

POST DOCTORAL FELLOWSHIP COURSES

S.No	Department	Courses	Seats	Eligibility
01.	CTVS	Pediatric & Congenital Cardiac Surgery	02	# MCh./DNB in the specialty
02.	Surgical Gastro-enterology	Advanced Laparoscopic GI Surgery	02	# MCh/DNB in the specialty
03.	Neurology	Headache Medicine	02	# DM/DNB in the specialty
04.	NEUROSURGERY	Endovascular Neurosurgery	02	# MCh./DNB in the specialty

POST DOCTORAL CERTIFICATEC COURSES

S.No	Department	Courses	Seats	Eligibility
01.	Anesthesiology	Critical care Medicine with Specialist training in Gastro & Hepatobiliary, Neuro & Cardiac Critical Care	02	# MD/DNB in the Specialty
02.	PATHOLOGY	•Gastro Intestinal and Hepatopathology & •Neuro-Pathology	01 each	# MD/DNB in the Specialty

Note :-

- The candidates appearing in examination in the current year are also eligible for the above courses, subject to submission of passing certificate/ Provisional degree at time of joining.
- Duration of the courses is one year.
- Salary for Post Doctoral Fellowship Courses and Post Doctoral Certificate Courses in the Level-11 as per the 7th CPC.
- The candidate must submit DMC registration certificate at the time of joining.
- Session shall commence w.e.f 01.02.2027.
- The Application fee for each course is Rs. 1000/- (Rupees one thousand only) in form of draft in favour of the Medical Superintendent GB Pant Hospital or TR V from Cashier of GIPMER.
- The application must reach on or before the last date of application by hand/Post i.e.14th December 2026 at 5.00 pm. in the office of Registrar Academic Cell D Block, 5th Floor, GIPMER New Delhi-110002.
- The interview will be held in the concerned departments of this institute on the **17th and 18th December 2026 at 10:00 AM** in the concerned departments.

REGISTRAR ACADEMIC CELL, GIPMER

Note:- Candidates are advised to visit regularly the institute Website " http://gbpant.delhigovt.nic.in" for further updates. The Medical Director, GB Pant Institute reserves the right of any amendment/cancellation and changes of this advertisement whole or in part without assigning any reason.

APPLICATION FORM FOR THE POST DOCTORAL FELLOWSHIP & POST DOCTORAL CERTIFICATE COURSES, GIPMER

Programme:- _____

Category (tick any:- GEN/SC/ST/OBC/PH (attach certificate)

Paste your latest passport size self attested photograph

1.Name in Block letter_____

2.Father's /Husband's Name:_____

3. Correspondence Address(In Block letters)_____

_____

4.Permanent Address:_____

_____

5.Mobile No._____

6. Email Address_____

7.Date of Birth_____

8.Present age (as on 01.01.2026)_____years_____months_____days

9.Educational Qualification: (Self attested copies of certificate be enclosed):

S.No.	Exam Passed	Year	Board/ University	% of marks	No. of Attempt
1					
2					
3					
4					
5					

10.Delhi Medical Council /NMC Registration No. _____

11. Whether worked as Senior Resident on Adhoc/Regular basis:

Name of the Institution	Worked as	Period of appointment		Specialty in which worked
		From	To	

12. Date of Passing of

DM/M.Ch./M.D/M.S__ _____(Attach Annexure)

13. Details of Publications :- _____ Attach Annexure)

14. Conference Attended :-_____

15. 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.

Date_____

Place_____

Details of Enclosures:

Name:_____

Signature of the Candidate :_____