

GOVT. OF NCT OF DELHI
OFFICE OF THE MEDICAL DIRECTOR
INDIRA GANDHI HOSPITAL
Sector -9 , Dwarka , NEW DELHI 110077
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File No : 8/A/44/IGH/2021/ 632

Dated : 24/05/2021

CIRCULAR

Applications are invited for following posts from 24-05-2021 to 07-06-2021. Selection will be done on First come First selected basis subject to verification of original documents and requirement of concerned Departments. Interested candidates may report at room no 45 before 1PM at Emergency Block Indira Gandhi Hospital with copies and original documents with filled application format as attached. The number of posts are tentative and may vary as per requirements. Posts are purely temporary as per requirement. Eligible applicants will be waitlisted if not immediately required. Preference will be given to PG Degree holders followed by experience in ICU. Applicants will appear with filled application format as attached.

Post	No/post	payment	Qualification
Senior resident/specialists/ consultants	32	10000/ shift/day for Specialists	Post-graduate in Pulmonary Medicine/ Critical Care Medicine /Medicine/Pediatrics/ Anaesthesia
		10000/shift/per day for Consultants	MBBS + 5 years experience in concerned branch (preferably ICU experience)
Senior resident /specialists/ Microbiology	01	10000 per shift per day	MD Microbiology


Medical Director
Indira Gandhi Hospital

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Dwarka, New Delhi-110077

APPLICATION PROFORMA FOR SENIOR RESIDENTS /Specialists for Walk in basis 24-5-2021 to 7-6-

2021

1. Name (in Block Letter): _____
2. Post Applied: _____
3. Date of Birth: _____ Age as on 1-5-2021 _____
4. Father's Name: _____
5. Permanent Address: _____

6. Correspondence Address : _____

7. Email ID: _____
8. Mobile No. _____
9. ADHAAR No. _____
10. Academic Qualification: _____
11. Experience

Paste here recent
passport size
photograph.

12. Registration with DMC/MCI _____

13. Any false information will lead to cancellation of application/job.

Undertaking:- I do hereby solemnly declare and affirm that the above information declared by me is correct to the best of my knowledge and belief.

Date:-

(Name and signature of the candidate)

En:-

1. Copy of Birth Certificate
2. Copy of Degree Certificate
3. Registration Certificate
4. Experience certificate
5. Copy of ADHAAR