### **GOVT. OF NCT OF DELHI OFFICE OF THE MEDICAL SUPERINTENDENT** SHRI DADA DEV MATRI AVUM SHISHU CHIKITSALAYA, DABRI, NEW DELHI -110045

No.F. 2(14)/751/Rectt./JR/WII/SDDMASC/Vol-V/2020/

10/2020 Date: 🔰

## NOTICE FOR WALK IN INTERVIEW JUNIOR RESIDENT ON ADHOC BASIS

A walk-in-interview for appointment to the posts of Junior Residents on Adhoc basis is to be scheduled as per following detail. Interested eligible candidates may report on following schedule in the Office of Medical Superintendent, Administrative Block, SDDMASC, Dabri, New Delhi-110045 along with duly filled application(attached hereunder) and original & self attested photocopies of Valid DMC / 10th certificate/ MBBS Degree, Marksheets & Attempt Certificate/Internship Completion Certificate/ Cast Certificate/ Experience Certificate/ Adhar & PAN Card/Photograph at 9.00 a.m. to 11.00 A.M. for registration on the date of appearing for Walk-in-interview :-

### VACANCY STATEMENT FOR JUNIOR RESIDENT

Junior Resident	Vacancy	Schedule of Walk-in-interview	Remarks		
	2	27.10.2020	On Adhoc Basis		

	CRITERIA OF ELIGIBILITY				
For JR	MBBS Degree from an institution recognized by MCI.				
Age limit as on date of interview	For JR : 37 years Age relaxation will be given to reserved candidates as per rules.				
Emoluments	For JR : Level 10 of pay matrix with basic pay Rs. 56,100/-				
DMC Registration	MBBS must be registered in the DMC Registration with validity at the time of interview.				

### Terms & conditions:-

- 1. No registration after 11.00 A.M. will be considered.
- 2. OBC certificate issued by GNCTD only (Non Creamy Layer) shall be considered.
- 3. The services of Junior Resident shall be governed by residency schemes of GOI and orders issued by H&FW Deptt., GNCTD.
- 4. Applicant who have completed 1 year Junior Residency earlier in any Medical institutions will also be considered in case of non availability of fresh candidates. Fresh candidates are those who have not done junior residency or have completed less than one year residency.
- 5. The appointment will be for a period of 89 days extendable up to a maximum of 1 year after break of one day after each 89 days or till the regular candidate joins, whichever is earlier.
- 6. Appointment will be subject to medical fitness and verification of certificate of educational qualification/age/caste/DMC registration and internship completion certificate etc.
- 7. The appointment will be extended on the basis of satisfactory work & conduct report from concerned HOD & request from the resident doctor concerned.
- 8. Result will be put on the website of Department of Health & Family Welfare, GNCTD.
- 9. Vacancy shown above may increase or decrease.
- 10. No TA/DA will be paid for appearing in the interview.

(Dr. Brijesh Kumar)

Medical Superintendent/ HOD

### GOVT OF NCT OF DELHI SHRI DADA DEV MATRI AVUM SHISHU CHIKITSALAYA DABRI, NEW DELHI-45

	$\checkmark$	APPLICA	TION PROI	ORN		JU	INIOR/		SENIC	OR RESID	ENT
	For Se	nior/Junio	r Resident	: MD,	/DNB/Diploma	/MBBS					
	Specie	alty in cas	e of SR:							Paste	here
1.	Name	Name (in Block Letter):							1	recent	passport
2.	Date	Date of Birth;Age as on								size pho	tograph.
3.	Father	Father's Name:									
4.	Permo	Permanent Address:									
		-						_			
5.	Corres	spondenc	e Address	5 :							
6.	Fmail										
7.											
8.											
9.											
10.					ip:						
11.			lification:-								
	Qualifi	ication	Name University	of /	Year of Passing	Subjec	t	Percer	ntage/[	Division	No. of Attempts
	MBBS										
	Diplon	na									
	MD/M	s/dnb									
12.	Categ	ory (give	detail Ger	n./SC	/ST/OBC):	(if	OBC, De	elhi 🔤	Ου	tside 🗌	)
13.	Detail o	of work ex	perience/	SR sh	ip/JR ship:-	No		Yes (i	f, yes,	detail	given
bel	ow):-										
	Add. (			Designation/Post held		From		Ī	0		
7											
	* tell										
] 4	4. Attach	ed DMC c	certificate.								

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

Undertaking:- I hereby undertaking that I have not completed 03 years Residency in case of SR and 01 year for JR anywhere in India.

Declaration: 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)