

**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./SR/Interview/SDDMASC/Vol-VI/2021/

2766

Date:

6/10/21

**NOTICE FOR WALK IN INTERVIEW SENIOR RESIDENT ON ADHOC BASIS**

A walk-in-interview for appointment to the posts of **Senior 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 **10<sup>th</sup> certificate/ MBBS Degree & Attempt Certificate/ Internship Completion Certificate/ PG Degree or Diploma & Attempt Certificate/ Caste Certificate/ Experience Certificate/ Valid DMC / 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 SENIOR RESIDENT**

Specialty (SR)	Vacancy	Schedule of Walk-in-interview	Remarks
Obs. & Gynae	8	<b>18-10-2021 to 17.11.2021 (excluding Saturday/Sunday/ Gazetted/Restricted Holiday) or till filling up of all the vacancies, whichever is earlier</b>	<b>On Adhoc Basis</b>
Radiology	2		
Pediatrics	2		

**CRITERIA OF ELIGIBILITY**

<b>Qualifications for SR</b>	PG Degree/DNB/Diploma from an institution recognized by MCI. If candidates with PG Degree/DNB/Diploma are not available, then applicants with at least 02 years experience in concerned specialty may be considered but their appointment is subject to availability of PG candidates.
<b>Age limit as on date of interview</b>	For SR : 45 years Age relaxation will be given to reserved candidates as per rules.
<b>Emoluments</b>	For SR : Level 11 of pay matrix with basic pay Rs. 67,700/-
<b>DMC Registration</b>	MBBS/ PG Degree/ DNB/ Diploma must be registered in the DMC Registration with validity or applied for on the date 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 Senior Resident shall be governed by residency schemes of GOI and orders issued by H&FW Deptt., GNCTD.
4. Applicant who has completed 3 years Senior 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 senior residency or have completed less than three year(s) residency.
5. The appointment will be for a period of 89 days extendable up to a maximum of 03 years after break of one day after each 89 days or till the regular/PG 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 show above may increase or decrease.
10. No TA/DA will be paid for appearing in the interview.
11. Competent Authority reserves the right of any amendment or cancellation of the advertisement.

  
**(DR. RAJIV KUMAR GUPTA)**  
**Medical Superintendent/ HOD**

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

APPLICATION PROFORMA FOR ☐ JUNIOR/ ☐ SENIOR RESIDENT

For Senior/Junior Resident: MD/DNB/Diploma/MBBS

Paste here  
recent passport  
size photograph.

1. Specialty in case of SR: \_\_\_\_\_
2. Name (in Block Letter): \_\_\_\_\_
3. Date of Birth: \_\_\_\_\_ Age as on \_\_\_\_\_
4. Father's Name: \_\_\_\_\_
5. Permanent Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Correspondence Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. Email ID: \_\_\_\_\_
8. Mobile No. \_\_\_\_\_
9. AADHAAR No. \_\_\_\_\_
10. Valid DMC No. \_\_\_\_\_
11. Date of completion of internship: \_\_\_\_\_
12. Academic Qualification:-

Qualification	Name of University	Year of Passing	Subject	Percentage/Division	No. of Attempts
MBBS					
Diploma					
MD/MS/DNB					

13. Category ( Gen./EWS/SC/ST/OBC): \_\_\_\_\_ (if OBC, Delhi ☐ Outside ☐ )

14. Detail of work experience/SR ship/JR ship:- ☐ No ☐ Yes (if, yes, detail given below):-

Add. Of employer	Designation/Post held	From	To	Total (Y/M/D)

15. Attached self attested copies all relevant documents/certificates.
16. Any false information will lead to cancellation of application/job.  
Undertaking:- I hereby declare 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)