

**GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI  
OFFICE OF THE MEDICAL SUPERINTENDENT  
BHAGWAN MAHAVIR HOSPITAL  
H-4/5, PITAMPURA, DELHI-110034.**

No. F3(213)/2017/BMH/Admn/SR-JR/Dental 9533-35

Dated- 2/1/24

**Advertisement**

**Subject:- Advertisement for the post of Junior Residents on Regular Basis in Dental Department Bhagwan Mahavir Hospital.**

Applications are invited for recruitment of Junior Resident (Dental) against vacant Posts for maximum period up one year on Regular Basis in Bhagwan Mahavir Hospital, Pitam Pura Delhi - 110034.

**Junior Resident (Dental)**

S.No	Name of Specialty	No of vacant post for advertisement on regular basis				Total
		Gen	OBC	SC	ST	
1.	J.R (Dental)	1	-	-	-	1

**EDUCATIONAL QUALIFICATIONS:-**

**For Junior Resident(Dental):-**BDS Degree from a recognized University/institution and **must have not completed internship earlier than two years on 12/01/2022**. Registration with Dental Council of India is compulsory.

**AGE LIMIT:-**

For J.R. -40 years for General (as on 12/01/2024).

**EMOULUMENTS:-**

For JR - As per Pay Matrix, at Level-10 (Rs. 56,100 - 1,77,500), plus usual allowance as admissible under the rules.

**Relaxations for** – Reservation to Handicapped candidates shall be given as per rules.

**Tenure:- For Junior Resident(Dental):-** The tenure of junior residents is for a period of one year only including any service rendered as Junior Resident earlier on adhoc /regular basis in any govt. recognized institution . The appointment will be initially for a period of six months that can be extended further up to a period of one year subject to satisfactory performance work and conduct report from concerned HOD.

**Registration with Dental Council of India is Compulsory.** Candidates having registration with the other state dental council will be allowed to appear, however, they will have to register themselves with Dental council of India, if appointed,

Applications must be sent by Post/Individually to Room No 136, Diary Section, Ist Floor, Bhagwan Mahavir Hospital, Pitam Pura Delhi-110034 latest by 12-01-2024 up to 4.00 p.m. with the photocopy of the documents which is mentioned below:-

✓

1. Date of Birth Certificate (Xth class)
2. Dental council of India/State Dental Council.
3. Degree.
4. Attempt Certificate.
5. Internship Certificate.
6. Mark-Sheets of all years.
7. Adhar Card/Voter Card/ Driving Licence/Valid Passport.

**The candidates may note that applications received after due date and time will not be considered. Any delay in post will not be considered.**

List of eligible candidate after scrutiny of the forms will be displayed on the Delhi Health Services website along with date of interview.

- **Application form is annexed.**


  
(DR. R.K. GUPTA)  
MEDICAL SUPERINTENDENT

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Copy forwarded to the following with the request to display the same on the Notice Board:-

1. P.A to M.S (For information)
2. Vacancy Section of H&FW Deptt. Web site.
3. Notice Board of B.M.H

  
(DR. R.K. GUPTA)  
MEDICAL SUPERINTENDENT

# APPLICATION FORM FOR JUNIOR RESIDENT( DENTAL)

1. Name of the candidate (in block letters).....
2. Father's/Husband Name.....
3. Date of Birth .....
4. Age as on (Date of interview) .....
5. Whether Belong SC/ST/OBC.....
6. Physical Challenged (Yes/No).....
7. Postal Address .....

Paste here duly  
attested  
Passport size  
Photograph

.....  
Permanent Address .....

8. Contact No. ....

9. Valid DMC/DDC /D.C.I No. ....

10. Date of completion of internship (For J.R. only).....

11. Academic Qualification .....

Qualification	Year of Passing	University/institution	% of Marks	Nos. of attempts

12. Details of Work Experience: .....

Complete Address of employer	Designation/Post held	From	To

13. All the relevant certificates should be self attested

14. Aadhar Number .....

15. **Declaration:** - I solemnly declare that the above statement made by me are correct to the best of my knowledge and nothing has been concealed thereof. If any information given above is found false/incorrect my candidature/service may be terminated.

Dated:

Date :

Place:

Name of Candidate:

(Signature of the Candidate)

Email id  
(Should be in capital letter)

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