Administration of U.T of Dadra & Nagar Haveli and Daman & Diu, Directorate of Medical & Health Services (Shri Vinoba Bhave Civil Hospital)

No.DMHS/EST/Med.Edu/Staff/2018/606[part-III]/2858

Silvassa

Date: 12 /05/2022

ADVERTISEMENT

Directorate of Medical & Health Services, Dadra & Nagar Haveli and Daman & Diu conducts walk-in-interview on <u>26/05/2022</u> at 08.00 am in the Office of Collector, Collectorate, DNH&DD, Silvassa for below mentioned vacant posts to be filled on short term contract basis under NAMO Medical Education & Research Institute, Shri Vinoba Bhave Civil Hospital and Rogi Kalyan Samiti, Silvassa.

Under NAMO Medical Education & Research Institute, Silvassa

| Sr. No. | Department | No. of posts | Name of post | Salary (In Rs.) |
|------------|---------------------------|--------------|---|-----------------|
| 1 | Professor | 9 | Anatomy-01, Biochemistry-01, Pathology-01, Forensic Medicine-01, Community Medicine-01, General Medicine-01, General Surgery-01, Obs & Gyn-01, Blood Bank-01 | 2,00,000/- |
| 2 | Associate Professor | 8 | Pharmacology-01, Pathology-01, General Medicine-02, Paediatrics-01, Anesthesiology-02, Radiology-01 | 1,80,000/- |
| 3 | Assistant Professor | 13 | Anatomy-01, Microbiology-01, Dermatology-01, General Surgery-02, Obs & Gyn-02, Radiology-01, Dentristry-01, General Medicine-02, TB & Chest-01, Anesthesiology-01 | 1,10,000/- |
| 4 | Tutor | 5 | Anatomy-01, Physiology-02, Pathology-01, Microbiology-01 | 1,00,000/- |
| 5 | Senior Resident | 2 | Dermatology-01, TB & Chest-01 | 1,00,000/- |
| 6 | Statistician Cum Tutor | 1 | Community Medicine-01 | 1,00,000/- |
| 7 | Tutor Cum LMO | 1 | Community Medicine-01 | 1,00,000/- |
| | Total | 39 | | |

^{*}Eligibility as per latest amendment of NMC regulations.

Under Directorate of Medical & Health Services, Silvassa

| Sr. | Name of Post | No. of | Age | Qualification | Consolidated Salary per |
|-----|--|---------|------------------------------|--|--|
| No. | | Vacancy | | | month |
| | | | | e Civil Hospital | |
| 1 | Neonatologist-01, Physician-01, General Surgeon-01 | 03 | Not Exceeding 45 years | MD/MS/DNB/ Diploma with experience. | Salary as per experience for Degree Fresh- Rs. 1,25,000/- Exp. More than 05 years- Rs.1,75,000 |
| 2 | Dermatologist | 01 | | | Salary as per experience for Degree Fresh- Rs. 1,10,000/- Exp. More than 05 years- Rs.1,50,000 |
| 3 | Pathologist | 01 | | | Salary as per experience for Degree Fresh- Rs. 1,00,000/- Exp. More than 05 years- Rs.1,25,000 |
| 4 | Medical Officer (MBBS) | 04 | Not Exceeding 35 years | MBBS Completion of compulsory rotating internship. | Rs. 70,000/- |
| | | | Rogi Kalya | an Samiti | |
| 1 | Neuro-Surgeon | 01 | Not Exceeding 45 years | MD/DNB/M.Ch. in Neuro-Surgery with experience. | ₹2,00,000/- |
| 2 | Nephrologist | 01 | Not Exceeding 45 years | MD/DNB with DM in Nephrology with experience. | ₹2,00,000/- |
| 3 | Gastroenterologist | 01 | Not Exceeding 45 years | MD/DM/DNB with experience. | ₹2,00,000/- |
| 4 | Chest Physician | 01 | Not Exceeding 45 years | MD/DM/DNB with experience. | ₹2,00,000/- |
| 5 | Cardiologist | 01 | Not Exceeding 45 years | MD/DM/DNB with experience. | ₹2,00,000/- |
| 6 | Radiologist | 02 | Not Exceeding 45 years | MD/DNB with experience. | Salary as per experience minimum ₹2,00,000/- for degree and ₹1,50,000/- for Diploma |

Eligible and desirous candidates may forward their applications in the prescribed format (download from website) to the Office of the Director, Medical & Health Services, Dadra and Nagar Haveli and Daman & Diu, Silvassa-396230 before 26/05/2022, with one set of attested photocopy of educational qualification and experience certificate. Details regarding eligibility, Recruitment rules, Salary details and the prescribed format of application are available on the official website: www.dnh.gov.in or www.vbch.dnh.nic.in

Note:

1. No TA/DA will be paid to the candidates for attending the interview.

2. Application will be summarily rejected if found deviant from the prescribed format and required criteria without assigning any reason

3. The Director, Medical & Health Services, DNH reserves the right to terminate the selection process without assigning a reason.

Contact No. 7624092991, (0260) 2642940

Website: www.dnh.gov.in & www.vbch.dnh.nic.in

E-mail: est.dmhs@gmail.com medicalcollege.dnh@gmail.com silvassarogikalyansamiti@gmail.com

Sd/-(Dr. V.K. Das) Director (M&HS)

ADMINISTRATION OF DADRA & NAGAR HAVELI AND DAMAN & DIU, UT DIRECTORATE OF MEDICAL & HEALTH SERVICES NAMO MEDICAL EDUCATION & RESEARCH INSTITUTE SILVASSA

| 1. | Post Applied for | | i | n (subject | ː) | | | |
|------------|---|------------------|------------|----------------|------------------|----------------|-------|--|
| 2. | 2. Name of candidate (In Block Letters) | | | | | | | |
| | & Address | | | | | | •••• | |
| | Telephone No with | code (Pho | ne) | •••,••• | (Mok | oile) | | |
| | E-mail ID | | | | | | •••• | |
| 3. | Date of Birth: | | (attest | ed copy o | f valid proof sh | nould be enclo | osed) | |
| 4. | Age (as on 1) / A | 2022): Yea | rsMo | nths | Days | | | |
| 5. | 5. Sex: Male/Female | | | | | | | |
| 6. | Date of appearance | e in last Mo | OI: | Des | signation | | | |
| 7. | Language Known: | | | | | | | |
| 8. | Marital Status: | Marri | ed Ur | nmarried | | | | |
| 9. | Educational Qual | <u>ification</u> | | | | | | |
| Sr. No. | Examination | Year of passing | University | Total Marks | Percentage | For office use | | |
| 2. | Final MBBS (Part II only) | | | | | | | |
| 2. | MD/MS/MDS | | | | | | | |
| 3. | MCH/DM (Super Specialty) | | | | | | | |

10. Teaching Experience

| Sr. | Teaching Post | Name of | Total Pe | riod | Total Ex | perience | For |
|------|-------------------|-------------|----------|------|----------|----------|----------------|
| No. | Held | Institution | From | То | Yrs | Mths | officer |
| | | | | | | | use (Secre) |
| | | | | | | | (Score) |
| | | | | | | | - |
| | | | | | | <u> </u> | _ |
| | | | | | | | |
| Tota | I Teaching Experi | ience- | | | | | |
| | | | | | | | |

11. Details of Research Publications:

| State/National/ International Journals | No. of Paper Published | Year of Publication | Name of Journal | Whether journal is Indexed (Yes/No) | For office use only |
|--|---------------------------|------------------------|--------------------|-------------------------------------|---------------------|
| , | | | | | |
| | | | | | |
| 12. <u>Details c</u> | of Medical/Dent | al Council Reg | istration: | | 1 |

| Registration No: | U.G | _ P.G |
|---------------------|-------|-------|
| Date of Registratio | n U.G | _ P.G |
| Name of Council | U.G | P.G |

13. Check list of Enclosures (attached photocopies: in following order)

| Attested photocopies in following orders | Please tick | Attested photocopies in following orders | Please tick |
|---|----------------|--|----------------|
| (6) Birth Date certificate : School Leaving | | (6) Degree Certificate | |
| (7) Final MBBS/BDS Mark Sheet. | | (7) Teaching Experience Certificate. | |
| (8) P.G. Marks Sheet | | (8) Research Publication (both original and photocopy) with a proof of Indexation. | |
| (9) MBBS/BDS; GMC/GDC Registration Certificate. | | (9) Domicile Certificate (For eligible Candidate) | |
| (10) MS/MD/MDS-GMC/GDC Registration Certificate. | | | |

Undertaking

I declare that information stated above are true to the best of my knowledge. If above Information is found to be false; I am bound to obey the decision of selection committee.

| Place: | |
|--------|--|
| Date: | |

Signature of Applicant

- Attested Copies of Relevant Certificate / Documents should be attached along with application Form
- Incomplete or Unsigned Application will be rejected

FOR DIRECTORATE OF MEDICAL & HEALTH SERVICES, SILVASSA

APPLICATION FORM DIRECTORATE OF MEDICAL & HEALTH SERVICES SHRI VINOBA BHAVE CIVIL HOSPITAL, SILVASSA UT OF DADRA & NAGAR HAVELI AND DAMAN & DIU

| | 4 | |
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| Name of Post applie | d for |
|--------------------------|--|
| Name of candidate (| in block letters) |
| Father's name: | |
| Address for commur | |
| | |
| | |
| | |
| | |
| Phone no.: | Mobile No |
| E_mail address : | |
| Date of birth: | (attested copy of valid Proof should be enclosed) |
| Age (as on 1 1 / o≤72022 |) Years Months Days |
| Category | : ST/ SC/ OBC / Others (attested copy of valid Proof should been closed) |
| Domicile of D&NH | : Yes / No. (attested copy of Domicile Certificate issued by Mamlatdar, |
| | Dadra and Nagar Haveli should be enclosed) |
| Language Kno | own : |

Educational Qualification:

| Academic | Name of School/College | Board/ University | Stream/ Special Subject | Year of Passing | Grade/ Percentage |
|-----------------------------|------------------------|----------------------|----------------------------|-----------------|----------------------|
| S.S.C | | | | | |
| H.S.C | | | | | |
| Graduation in | - | | | | |
| Post Graduation in | | | | | |
| Any other Please specify | | | | | |
| | | | | | |

Work Experience:

| Sr. No. | Designation | Organization | Duration | | | Nature of Duties |
|------------|-------------|--------------|----------|----|---------------|------------------|
| | | | From | То | Total Exp. | |
| | | | | | | |
| | | | | | | |
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| | | | | | | |

I hereby declare that all the statements made by me in the application form and information sheet are true and complete to the best of my knowledge and belief. I also understand that in case, any of my statements is found untrue during any stage of recruitment and thereafter, I shall be disqualified for the post applied for and I shall be liable for any penal action.

| \Box | 9 | ta | • |
|--------------------|---|----|---|
| $\boldsymbol{\nu}$ | a | ľC | |

Place:

Signature of candidate

- Attested Copies of Relevant Certificate / Documents should be attached along with application Form
- Incomplete or Unsigned Application will be rejected