भोपाल स्मारक अस्पताल एवं अनुसंधान केन्द्र

BHOPAL MEMORIAL HOSPITAL AND RESEARCH CENTRE

(A 350 Bed Super- Specialty Hospital, Department of Indian Council of Medical Research (ICMR), Department of Health Research (MoH&FW), Govt. of India)

रायसेन बायपास रोड, भोपाल - 462 038 Raisen Bypass Road, Bhopal - 462 038 (M.P.)

Phones:- +91 755 2742212-16, FAX:- +91 755 2748309, Email: bmhrcbhopal@gmail.com, Website: www.bmhrc.ac.in

Advertisement No: 119/BMHRC/Bhopal/2023 Date: 02/03/2023

VACANCY -01

FOR THE POST OF CONTRACTUAL ASSISTANT PROFESSOR – Cardiology LAST DATE FOR SUBMISSION OF APPLICATION: 17/03/2023(Friday)

Applications are invited on Contract Basis from interested doctors including those who have retired from (Central/State Government services) who are willing to be empanelled as **Contractual Assistant Professor Cardiology** for a period of One year or till the permanent post is filled up by a regular incumbent whichever is earlier.

- 1. The aspiring applicants satisfying the eligibility criteria in all respect may submit their application form (Annexure-I) duly filled with self attested copies of all credentials in support of educational qualifications, age, caste/community (hard copies) by speed post / by hand to the below mentioned address so as to reach the same <u>latest 17/03/2023</u>. The envelope containing the hard copy of application form must be super-scribed "Application for the post of <u>CONTRACTUAL</u> ASSISTANT PROFESSOR CARDIOLOGY at BMHRC".
- * Certificate in support of age (10th)
- * Mark Sheet of MBBS (All Profs)
- * Degree of MBBS
- * Internship completion Certificate
- * Degree of concerned specialty
- * Degree of DM / DNB in Cardiology.
- * Registration with MCI/ State Medical Council
- * SC/ST/OBC/PH certificate in prescribed format of Govt. of India
- * Experience Certificate (if any)
- * No Objection Certificate (if the candidate is already in Service)

The Director Bhopal Memorial Hospital and Research Centre Administrative Block, Raisen Bypass Road, Karond, Bhopal – 462038 (M.P.)

III. Monthly Remuneration: Rs.1,00,000/- per month

IV. Eligibility Criteria:

- (i) A recognized Bachelor of Medicine and Bachelor of Surgery (MBBS) degree.
- (ii) DM (Cardiology)/ DNB Cardiology.
- (iii)At least one year teaching experience as Senior Resident or Tutor or Demonstrator or Registrar in the concerned specialty or super specialty in a recognized institution, after obtaining the first post graduate degree.

Candidate must have/or applied for Additional Registration for PG Degree & Post PG Degree with MCI/M.P. State Medical Council.

V. Criteria of Selection:

- i) Marks based on the qualification:
 - a) Marks for percentage of marks (MBBS) : 55% 64.99 %=2 Marks 65%-74.99%= 3 Marks 75% & and above=

74.99% 3 Marks /3% & and above

5 Marks

b) Gold Medal: 05 Marks Each (Maximum 10 Marks)

- c) Marks for Experience : 02 Marks for each complete year (Max.10 Marks) (After obtaining first Post Graduate Degree)
- ii) Marks of interview (out of 75)

Job Requirement (Roles & Responsibilities): Various duties as **Assistant Professor** as assigned by the HOD of the concerned department /Director, BMHRC, Bhopal.

VI. **Place of Duty:** The place of duty will be at BMHRC, Bhopal.

VII. Age Limit up to 62 years relaxable up to 64 years in case of meritorious candidates.

VIII. No TA/DA is admissible for the interview.

IX. The appointee will not be granted any claim or right for regular appointment to any post.

- X. The appointee shall be on the whole time appointment of the institution and shall not accept any other appointment, paid or otherwise and shall not engage himself/herself in private practice of any kind during the period of contract.
- XI. The individual will be initially engaged for a period of one year or till the regular posts are filled, whichever is earlier.

GENERAL INSTRUCTIONS:

- I. The Competent Authority reserve the right to make any amendment, cancellation and changes in this advertisement in whole or in part without assigning any reason.
- II. The candidates are advised to ensure that they fulfill the eligibility criteria as mentioned in the advertisement before applying for the posts.
- III. Vacancies may increase or decrease at the time of interview by the orders of the competent authority. The vacancies indicated as above are provisional and includes anticipated vacancies. This is subject to change without any notice.
- IV. Crucial date for determination of eligibility with regards to Educational Qualification and Experience will be <u>17/03/2023</u>.
- V. The interested applicants may submit their candidature as per the attached application form (Annexure-I) along with all relevant documents as mentioned above in point no.1 at any point of time. Application Form (hard copy only) should be accompanied by copies of necessary documents duly self attested by the candidate for verification on the date of Interview.
- VI. The applications submitted shall be evaluated by the competent authority and if found eligible they shall be called for interview as and when requirement arises.
- VII. The interview call letters shall be sent by speed post/email however the hospital shall not be responsible for any postal delay/ lapse, whatsoever.
- VIII. Incomplete applications in any respect will not be considered. Only applications in response to this advertisement on prescribed pro-forma attached herewith will be considered.
- IX. Other service conditions will be applicable as per service condition prescribed from time to time by the Government of India
- X. All original documents as mentioned above in point no.1 will have to be brought by the candidate at the time of interview for verification.
- XI. The candidates, who are employed in Central / State Government, should submit a 'No Objection' certificate from their employer at the time of interview. In case, they do not furnish the same for some reasons or other, their candidature will not be considered

- XII. Inter hospital / Inter Institutional transfer shall not be permitted.
- XIII. Any canvassing by or on behalf of candidates or to bring political or other outside influence with regard to selection/recruitment will lead to disqualification.
- XIV. The candidates must submit the application in the prescribed form and paste recent passport size photograph on it. All the documents must be self-attested including his/her photograph on the application form
- XV. No correspondence or personal inquiries shall be entertained
- XVI. The competent authority reserves the right to verify the authenticity of the certificates submitted. If found incorrect, the candidature will be cancelled without any further notice.
- XVII. The appointment to the said post will be subject to physical fitness from the competent medical board for which he/she will be sent to designated medical authority by the Institution before joining the post.
- XVIII. Application should be accompanied by a Demand Draft of Rs.500/- for unreserved & OBC candidates (non refundable), issued after the date of advertisement, drawn on a scheduled bank in India, in favour of Bhopal Memorial Hospital and Research Centre, Bhopal payable at Bhopal. SC/ST candidates and Persons with disability (PWD) candidates are exempted
- XIX. The candidates are advised see the hospital website (www.bmhrc.ac.in) frequently for any amendment OR corrigendum.

IMPORTANT

- * Applicants should indicate the post applied for legibly on the first page of prescribed "APPLICATION FORM".
- * JURISDICTION OF ANY DISPUTE: In case of any legal dispute the jurisdiction of the court will be Bhopal.
- * Application Form can be downloaded which is attached as **Annexure I**.

Director, BMHRC, Bhopal

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Advertisement No: 119/BMHRC/Bhopal/2023

APPLICATION FOR THE POST OF CONTRACTUAL ASSISTANT PROFESSOR–CARDIOLOGY

Affix a recent

Date: 02/03/2023

						Photo	ograph
	<u>]</u>	Tick the Appli	cants Catego	<u>ory</u>			
General	Scheduled Caste						
Scheduled Tribe		Other Backward Class					
(Enclose proof of C	aste Cer	tificate issued	by Competer	t Authority)	_		
1. Name of the App	licant: _						
2. Sex: Male / Fema	ale (tick	k applicable wo	ord) Marita	ıl Status: Ma	rried / U	nmarried	
3. Father's Name: _							
4. Name of the Spor							
5. Date of Birth:		Age	e as on <u>17/03</u>	<u>/2023</u>	Year	Months	Days
6. Present Address	:						
	:						
	:						
	Mobile	No					
	Email	:		· · · · · · · · · · · · · · · · · · ·			
Email :							
		•	Tele	phone No			
		Mobile No. : _					
8 Nationality:		_					

9. Educational Qualification :(Enclose photocopies of degree/diploma certificates & mark sheets)

Name of Examination	Maximum Marks	Marks Obtained	% of Marks	No. of Attempts	Month & Year of Passing	College & University	Awards/ Distinction
MBBS I Prof.							
II Prof.							
Final (Part-I)							
Final (Part-II)							
Total of all MBBS Exams							
DM/ DNB							

10. Permanent MCI/ State Medical Council Registration Details: Name of the Medical Council: MBBS Registration No. _______ Place ______ Post PG Registration No. : ______ Place ______ DM Registration No. : ______ Place ______ 11. Current Activities:

Contd...

// 3 // **12. Experience:** (Enclose copies of Work Experience Certificates)

Name of the Present & Previous Employer with Address /	Present / Previous	Period		Nature of Work	
Contact Nos.	Post	From	То		

(Use separate sheet if space is inadequate)

13. Name and address of two referees knowing the applicant's work:

Name	Occupation or Position	Address with telephone No. & e-mail

14. Details of relatives in BMHRC if any:

Name	Post & Department	Telephone No. & e-mail

Contd. ...

15. Declaration: (Only for OBC category candidates)

"I,		son/daughter	of Shri.	
"I, resident of he	Village/town/	'City	District	State
he	ereby declare that I bel	long to the		Community which
is recognized as back	ward class by the Gov	ernment of In	dia for the pur	pose of reservation in
-	rs contained in the	•		_
	012/22/93-Rest. (SCT)	*		
	ctions (Creamy Layer			
	Memorandum dated			_
	tt.(Res) dated 9.3.200	04 and 14.10.2	2010 and OM	No. 36033/01/2013-
Estt.(Res.) dated 27.05	5.2013.			
16. Any other inform	ation you wish to add	l:		
17. Check List : (Plea	ase tick in the box give	en below as p	roof of enclosu	ıres). All Certificates
	and be attached in the			,
* Certificate in suppor	t of age (10th)			
* Mark Sheet of MBB				
* Degree of MBBS	,			
* Internship completic	on Certificate			
* Degree of concerned	l specialty			
* Degree of DM/ DNB	in Cardiology			
* Registration with M	CI/ State Medical Cour	ncil		
* SC/ST/OBC/PH cer	tificate in prescribed for	ormat of Govt.	of India	
* Experience Certifica				
* No Objection Certifi	icate (if the candidate i	s already in Se	ervice)	
	DECI	LARATION		
I,	decla	are that the inf	ormation furni	shed above is true and
correct to the best of	my knowledge and be	elief and no re	lated informati	on is concealed. I am
aware that if any of	the above statements a	are found to b	e incorrect or	false or any material
	lars of relevance have			
•	r appointment and if	appointed, m	y appointment	will be liable to be
terminated."				
Place:				
Date:			` •	of the applicant)
		Ful	l Name:	