

An Institute of National Importance under the Ministry of Health and Family Welfare, Govt. of India

Dhanwantri Nagar, Puducherry-6

Phone: 0413-2296019-20

www.jipmer.edu.in

Fax: 0413-2272067

## Department of Medical Oncology

### No.JIP/MEDONC/JAL/2023

Date: 18.03.2023

#### **Recruitment Notice**

Applications are invited by the HOD, **Department of Medical Oncology**, JAWAHARLAL INSTITUTE OF POSTGRADUATE MEDICAL EDUCATION AND RESEARCH (JIPMER), Puducherry, from candidates fulfilling the following eligibility conditions to work as "**Patient Counsellor**" on contract basis.

#### No.of Posts

 Patient Counsellor - 1 post
Selected candidates will be engaged on a contract basis (for a period of 6 months, may be extendable) in a project titled: JAL FOUNDATION

Interested and eligible candidates may email their CV and supporting documents scanned in one pdf to the mail ID: <u>medicaloncologyrecruitment@gmail.com</u>

# ALONG WITH FILLED APPLICATION FORM AS PER ATTACHMENT. (Applications not in the prescribed format application form will not be accepted)

<u>Please mention the name of the post applied. Application form must be filled for the post as appropriate</u> <u>and scanned and sent along with supporting documents in a single PDF file to the above email ID. The</u> <u>PDF file should be named as:</u>

• *"candidate name\_PC\_JAL\_application"* 

#### Last Date for sending applications and CV by email is **30th March 2023 upto 5 PM**.

Candidates will be shortlisted based on their application and CV. The shortlisted candidates will receive an email confirmation which will also include details of further selection process. The details will also be displayed on the JIPMER website. Selection will be based on CV and application as well as written test and interview.



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#### Eligibility Criteria:

#### A. Essential :

Graduate in social working/nursing with 6 months – 1 year experience in hospital setting involving patient care.

#### B. Desirable:

Ability to converse in Tamil language. Experience in patient care/counselling in oncology.

#### C. Contractual Remuneration : 16,500/- (consolidated ) per month

D. Maximum Age Limit: 35 years

**E.** Evaluation criteria: After evaluation of the application form, written test and interview will be conducted.

#### **Terms and Conditions:**

**1.** This position will be purely on temporary/contractual basis for the specified period of time and based on project. The engagement may be extended or curtailed at the discretion of the PI of the project.

**2.** Qualification and experience should be in relevant discipline/field and from an institute of repute. Experience should have been gained after acquiring the minimum essential qualification.

**3.** Qualification, experience, other terms and conditions may be relaxed/ altered at the discretion of the Principal Investigator.

**4.** The Posts are purely on contract basis for an external sponsored project, and no claim for any regular post in JIPMER shall be entertained.

5. Valid email id and mobile number is compulsory.

**6.** Consolidated salary of the post may vary from time to time. NO other allowance/facilities other than consolidated salary shall be extended.

7. Decision of the Principal Investigator will be final.

8. No TA/DA will be paid for the interview.

9. Canvassing of any kind will lead to disqualification.

**10.** Submission of wrong or false information during the process of selection shall disqualify the candidature at any stage.

**11.** Only shortlisted candidates will be called for interview.

**12.** Incomplete applications and applications which are not in the format prescribed below and those not satisfying the essential criteria mentioned above will be summarily rejected without assigning any reasons thereof. Candidates may attach their CV with this application. Application with CV alone without the prescribed form and attachments of certificates etc will be rejected.

**13.** Interview for the post may be conducted through videoconferencing or in-person. Candidates will be responsible for having a suitable device (computer/laptop/mobile) for participating in the interview from their end and must ensure that they have an adequate internet connection at that time. Prior intimation of the interview date and time will be provided so that the candidate may prepare for the same.



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## **Application for the Post of Patient Counsellor**

For JAL FOUNDATION Project

Print in A4m size paper and fill in with Block Letters with BLUE PEN

	Affix your recent Passport size Photo
1. Name of the Applicant:	
2. Father's Name:	
3. Gender ( <i>Male/Female/other</i> ):	(Do not staple)
4. Date of Birth (dd/mm/yyyy):	
5 .Marital Status (Married/Unmarried:	
6. Age (as on 28 <sup>th</sup> February 2023):years months	days
7. Nationality:	
8. Address for Communication:	
PINCODE	
9. Permanent Address:	
PINCODE	
10. Mobile:	
11. Email ID:	
12. Have you ever been convicted by a court of law or is there any cr	iminal case / disciplinary

action / vigilance enquiry pending against you?

If so, specify: \_\_\_\_\_



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## **13.** Language Proficiency

Able to Read & Write	
Able to Converse only	

# 14. Educational Qualifications: (Enclose self-attested photocopies)

	Educational Qualification	Board/University	Year of	%	Subjects
	(from SSLC /Matriculation)		passing	Marks	
1	Tenth Equivalent				
2	Higher Secondary				
3	Degree				
4	Post-graduation				
5	MBA (if any)				
	Other qualifications				
6					
7					
8					



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## **15. Details of Previous Employment (if any):** (*Pls attach PDFs of proof of work*)

Phone: 0413-2296019-20

	Employer	Designation	From (date)	To (date)	Duration (yrs/mos / days)	Nature of Work
1						
2						
3						
4						
5						
6						

16. Please describe in less than 500 words about your experience in patient counselling and clinical care.



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17. Any other relevant information: \_\_\_\_\_

18. Please provide contact information /email and telephone number of your previous employer whom we can contact regarding your previous/ current work.

(Please intimate your previous employer(s) that they may be receiving calls from us regarding this and obtain their permission)

I accept enquiries about my previous work with my earlier employer(s) Yes/No\_\_\_\_\_

Contact information of previous employer(s)

Name	Designation	Company/Organization	Phone	Email ID
		Name		

- 19. Check List: (Please tick as proof of enclosures) All Certificates must be attested and be attached in the following order:
  - i. **Proof of Indian nationality** (copy of aadhaar /voter Id/ passport /driving license)
  - ii. Certificate in support of age (Tenth equivalent/High School Certificate)
  - iii. Degree/Diploma .....
  - iv. Experience Certificate.....
  - v. Any others (if any).....



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## **Declaration by the Applicant**

Application for the post of: Patient Counsellor

I, ------ wish to apply for the above post and hereby declare that all the statements made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect or ineligible and detected before or after Exam/Interview, I hereby convey my consent for cancellation of my candidature. Further, I declare I have gone through all the terms and conditions of the appointment. I will abide the same and I will not claim any regularization.

Place:

Date:

(Signature of the Applicant)