

N. F. RAILWAY
OFFICE OF THE CHIEF MEDICAL SUPERINTENDENT
DIVISIONAL RAILWAY HOSPITAL
LUMDING, NAGAON, ASSAM-782447
No. H/15/HONY. SPL/LM Dated.20/03/2023

CHIEF MEDICAL SUPERINTENDENT, Divisional Railway Hospital, Lumding for & on behalf of President of India invites applications for engagement of Honorary Visiting Specialists (HVS) in each of the specialties of Ophthalmologist, Radiologist, Pediatrician and Pathologist.

Terms & Conditions :-

1. Educational Qualification & Experience :
 - a) Specialist-Post-Graduate degree from recognized university. Minimum 3 years experience in the professional work related to concerned specialty in case of post graduate degree.
2. Age Profile :- During first time engagement, the preferred age is between 30 years to 64 years. Upper age limit of continued engagement is 65 years.
3. Current rate of honorarium to be paid :-

Doctor's	Hours	Specialist (Rs.)
Ophthalmologist	04 hours a day for 02 days/week	Rs. 24,000/- P.M
Radiologist	04 hours a day for 02 days/week	Rs. 24,000/- P.M
Pediatrician	04 hours a day for 02 days/week	Rs. 24,000/- P.M
Pathologist	04 hours a day for 02 days/week	Rs. 24,000/- P.M

4. Tenure of working:- Each time the offer is given for a year only. After expiry of one year, extension can be given on yearly basis subject to age limit.
5. Detail terms & conditions as per Railway Board's L/No. 2014/H-1/12/8/HVS/Policy dated. 19.06.2018 can also be obtained from office of Chief Medical Superintendent, Divisional Railway Hospital, N. F. Railway, Lumding, Nagaon, Assam-782447. The detail documents is also available on Northeast Frontier Railway Website www.nfr.indianrailways.gov.in.
6. Short listed Doctors will be intimated in course of time after approval from competent authority.
7. The application in the format along with address, contact number, passport size photograph & self-attested copies of documents [MBBS certificate, Postgraduate degree certificate, Post doctoral degree certificate (where applicable), Registration certificate, additional qualification & experience, PAN Card, e-mail ID and Phone number] may be submitted at the address below.
8. Address for correspondence - Chief Medical Superintendent, Divisional Railway Hospital, N. F. Railway, Lumding, Nagaon, Assam-782447
9. Last date of receipt of application 01.00 PM of 25/4/2023


20/3/2023

(Dr. Swapna Daimari)
Chief Medical Superintendent
N. F. Railway, Lumding

APPLICATION & SELF DECLARATION FOR HONOURARY VISITING SPECIALIST

To
Chief Medical Superintendent
Divisional Railway Hospital
N. F. Railway, Lumding – 782447

A. PERSONAL DETAILS – (ANY SUPPRESSION OF FACTS OR FALSE INFORMATION WILL LEAD TO CANCELLATION OF CANDIDATURE)

1. Name (BLOCK LETTERS) :

2. D. O. B :

3. Age on Date of Advt. :

4. Father's Name :

5. Mobile No. :

6. Address :

7. Current Occupation :

8. APPLICANT's Present Address & Mailing Address (BLOCK LETTERS) :

PIN CODE :

9. APPLICANT's Permanent Address (BLOCK LETTERS) :

PIN CODE :

10. MEANS OF COMMUNICATION WITH APPLICANT (Please pay attention & fill in correct details) :

i. E-mail address (in BLOCK LETTERS) :

ii. Mobile No. :

iii. Landline No. (With STD Code) :

11. APPLICANT's identification details : (Sr. No. i/ to iii/ are essential)

i. PAN CARD No. :

Date of issue & validity :

ii. VOTER ID No. :

Date of issue & validity :

iii. ADHAAR CARD No. :

Date of issue & validity :

A. EDUCATION QUALIFICATION & EXPERIENCE DETAILS :

1. Educational Qualification :

SL No	Qualifications	Medical College/University	Year of Passing
1.	Graduation (MBBS)		
2.	Post Graduation (MD/MS/DNB)		
3.	Super Specialization (DM/MCh/Dr.NB)		
4.	Any other		

B. Publications with details, if any :

SL No	Journal/Book	Title of publication	Year of Publication

C.Details of Experience

SL No	NAME & ADDRESS OF INSTITUTION	TOTAL PERIOD WITH DATES	NATURE OF JOB RESPONSIBILITIES HELD

E.Details of Certificates : Copies of Documents duly self attested to be submitted with application (from S. No. 1 to 11) :

SL No	TYPE OF DOCUMENT SUBMITTED	Whether submitted (write Yes/No)	If No, give reasons there for	Remarks (By the Scrutinizing Official)
1.	Birth Certificate			
2.	Degree Certificate of MBBS			
3.	Internship Completion Certificate			
4.	MC Registration Certificate			
5.	PG degree (MCI recognized only)			
6.	PG diploma (MCI recognized only)			
7.	Publications & Details			
8.	PAN CARD			
9.	VOTER ID			
10.	ADHAAR CARD			
11.	Proof of Present Address			

F.DECLARATION

- I, Dr. s/d/o hereby solemnly declare that statements made above by me are correct & true to the best of my knowledge and belief.
- Further, I do undertake that the above statements, if found false at any stage in future, my appointment shall be cancelled by the administration and I shall be liable for punitive/disciplinary action whatever deemed fit.
- The Decision of the Selection Board will be final. In case of any legal dispute the jurisdiction of court will be Guwahati only.

Date :

Place :

Signature of Candidate

(Name :)