



भोपाल स्मारक अस्पताल एवं अनुसंधान केन्द्र

BHOPAL MEMORIAL HOSPITAL AND RESEARCH CENTRE

(Indian Council of Medical Research (ICMR), Department of Health Research (MoH&FW), Govt. of India)
Affiliated with MP Medical Science University, Jabalpur

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

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04.08.2023

VACANCIES – SENIOR RESIDENTS

The last date of submission of application is 16/08/2023 (Wednesday)

With reference to the previous rolling advertisement No. BMHRC/Bhopal/2023/09 dated 18/05/2023 (**Enclosure-I**), Bhopal Memorial Hospital and Research Centre, Bhopal invites applications from Indian Nationals in the prescribed form (**Annexure-I**) for the posts of **Senior Residents** on tenure basis. **The last date of submission of application is 16/08/2023 (Wednesday).**

Details with Eligibility Criteria for the following specialties are as under :

Sl. No	Departments	Eligibility Criteria
1	Anaesthesia	Postgraduate Degree / Diploma (approved by MCI) in the concerned specialty after MBBS failing which MBBS with two years experience in a Govt. organization out of which one year in the concerned specialty. However appointment of the plain MBBS Candidates shall be on adhoc basis for a period of 89 days and extendable for further 89 days, if previous service found satisfactory or till the post is filled up by the candidates having Post-graduate Degree/ Diploma in the concerned specialty.
2	<u>Medicine Group</u> - Cardiology, GI Medicine, Neurology, Nephrology, Pulmonary Medicine.	
3	Pathology	
4	Radiology	
5	<u>Surgery Group</u> - CTVS, GI Surgery, Neurosurgery, Urology	
6	Transfusion Medicine	

The vacancy position may be revised/changed as per requirement hence, candidates are advised to visit our website www.bmhrc.ac.in regularly. The appointment will be as per the available vacancy.

- Note :**
- 1. Please refer Enclosure-1 for further details and application form.**
 - 2. Doctors who had applied earlier against adv. No. BMHRC/Bhopal/2023/09 dated 18/05/2023 may not need to apply again.**

Director
BMHRC, Bhopal

ENCLOSURE-1

ROLLING ADVERTISEMENT FOR THE POST OF SENIOR RESIDENT

- I. Bhopal Memorial Hospital and Research Centre, Bhopal invites application for the post of Senior Resident under Govt. of India.
- II. Details of Vacancies for the post of Senior Residents is mentioned in **Annexure-I**. The vacancy position may be revised / changed, as per requirement hence candidates are advised to visit BMHRC website regularly.
- III. The aspiring applicants satisfying the eligibility criteria in all respect can submit their application form (**Annexure-I**) along with the following documents in hardcopies **by speed post / by hand/email (www.bmhrc2022@gmail.com)** to the below mentioned address latest by 16/08/2023 (Wednesday).
 - Certificate in support of age (10th class passing certificate)
 - Degree certificate of MBBS
 - Degree of MD/MS/DNB or Diploma certificate
 - Degree of DM/M.Ch
 - Registration certificate with MCI / State Medical Council (M.P.)
 - MBBS Degree certificate and mark sheets.
 - Internship completion certificate.
 - Undergraduate/Post Graduate attempt certificate
 - Proof of Publication/Presenting paper in conference
 - Caste/community/disability certificate where applicable.
 - OBC certificate only as per **Annexure II** with required a validity as mentioned at Para 4(b) above.
 - Experience certificate (if any)
 - No objection certificate (if any)

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

(The envelope containing the hard copy of application form must be super scribed as “Application for the post of Senior Resident in Department of

IV. Pay Scale: Rs. 67700 + NPA+DA in Pay Level-11 in the Pay Matrix as per 7th CPC + Other allowances as admissible as per Govt. of India Rules.

Contd..

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I. Eligibility Criteria:

1. Postgraduate Degree/Diploma (approved by MCI) in the concerned specialty after MBBS failing which MBBS with two years experience in a Govt. organization out of which one year in the concerned specialty. However appointment of the plain MBBS Candidates shall be on adhoc basis for a period of 89 days and extendable for further 89 days, if previous service found satisfactory or till the post is filled up by the candidates having Postgraduate Degree/Diploma in the concerned specialty.
2. Candidate must have/or applied for Registration (Under Graduate/PG Degree/PG Diploma) with MCI/ M.P. State Medical Council.

II. Age Limit:

- A. 45 years (For General candidates)
- B. 50 years (For SC/ST Candidates)
- C. 48 years (For OBC candidate)
- D. For PWD candidates upper age limit is relaxable as per Govt. of India rules.

III. Reservation: All reservations will be considered in the above posts strictly in accordance with prescribed norms/ rules.

- A. SC/ST candidates to submit copy of community/caste certificate.
- B. OBC candidates should submit OBC certificate as per Annexure-II having date of issue on or after 01.04.2013 vide OM No. 36036/2/2013-Estt. (Res. I) dated 31.03.2016 of DOPT, Ministry of Personal & Public Grievance & Pensions, New Delhi.
- C. Persons with disability (PWD) to produce/submit a certificate issued by competent medical authority.

IV. Pay Scale: Rs. 67700 + NPA+DA in Pay Level-11 in the Pay Matrix as per 7th CPC + Other allowances as admissible as per Govt. of India Rules.

V. Tenure:

The tenure of Senior Resident (applicable for PG/Diploma candidates) is for Three Years including any service rendered as Senior Resident earlier on adhoc/regular basis in any Govt. of India / State Government hospital. Under no circumstances, the total period of Senior Residency shall exceed three years, at the time of joining. The appointment will be initially for a period of one year, which could be extended for a period of three years (if otherwise eligible) on an annual basis subject to the satisfactory work & conduct report from the concerned HOD.

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GENERAL INSTRUCTIONS:

- I. The Competent Authority reserves 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 the date of interview.
- 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. III 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. III 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

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- 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.590/- (including GST) for un-reserved & 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

APPLICATION FORM

BHOPAL MEMORIAL HOSPITAL AND RESEARCH CENTRE
Raisen Bypass Road, Karond, Bhopal – 462038
(ICMR (Department of Health Research (MoHFW), Govt. of India

Affix a recent
Pass Port
Size
Photograph

Adv. No: BMHRC/Bhopal/2023/09

Application for the Post of Senior Resident in the department of _____

<u>Details of Demand Draft/ Cash Receipt No.</u>	<u>Tick the Applicable Category</u>
DD No. / Cash Receipt No. <input type="text"/> Date: <input type="text"/>	General <input type="checkbox"/> Scheduled Caste <input type="checkbox"/>
Amount <input type="text"/>	Scheduled Tribe <input type="checkbox"/> Other Backward Class <input type="checkbox"/>
Name of the Bank <input type="text"/>	Physically Handicapped (PH) <input type="checkbox"/> (Enclose proof of Caste Certificate issued by a Competent Authority)

1. Name of the Applicant: _____

2. Sex: Male / Female (tick applicable word) Marital Status: Married / Unmarried

3. Father's/Mother's Name: _____

4. Spouse Name: _____

5. Date of Birth: _____ (in words) _____

6. Age as **16/08/2023**

Years	Months	Days
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7. Present Address: _____

_____ Telephone _____

E-mail: _____

8. Permanent Address: _____

_____ Telephone _____

9. Nationality: _____

Contd....

10. Permanent MCI / State Medical Council Registration No. :

MBBS : Registration No. _____ Place _____

MD/MS/DNB/Diploma : Registration No _____ Place _____

DM/M.Ch. : Registration No _____ Place _____

11. Date of Completion of Internship: _____

12. 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	Award/ Distinction
MBBS I Prof.							
II Prof.							
Final (Part-I)							
Final (Part-II)							
Total of all MBBS Exams							
MD/MS/DNB/ Diploma in _____							
DM/ M.Ch. in _____							

13. Research Papers published: If any (Give details & Proof)

14. Experience: (Details of service done earlier- enclose copies of Work Experience Certificates) if any

Name of the Government Organization with full address	Designation	Duration of Tenure		Total Period
		From	To	

(Use separate sheet if space is inadequate)

15. Check List: (Please tick in the box given below as proof of enclosures. All Certificates must be self attested and be attached in the following order:

(i)	Certificate in support of age (10 th class passing certificate)	_____→	<input type="checkbox"/>
(ii)	Degree certificate of MBBS	_____→	<input type="checkbox"/>
(iii)	Degree of MD/MS/DNB or Diploma certificate	_____→	<input type="checkbox"/>
(iv)	Degree of DM/M.Ch	_____→	<input type="checkbox"/>
(v)	Registration Certificate with MCI / State Medical Council (M.P.)	_____→	<input type="checkbox"/>
(vi)	MBBS Passing Certificate and mark sheets.	_____→	<input type="checkbox"/>
(vii)	Internship completion certificate.	_____→	<input type="checkbox"/>
(viii)	Undergraduate/Post Graduate attempt Certificate	_____→	<input type="checkbox"/>
(ix)	Proof of Publication/presenting paper in conference	_____→	<input type="checkbox"/>
(x)	Caste/community/disability certificate where applicable.	_____→	<input type="checkbox"/>
(xi)	OBC certificate only as per Annexure III with required validity as mentioned at para 4(b) above.	_____→	<input type="checkbox"/>
(xii)	Experience certificate (if any)	_____→	<input type="checkbox"/>
(xiii)	No objection certificate (if any)	_____→	<input type="checkbox"/>

DECLARATION

I, _____ declare that the information furnished above is true and correct to the best of my knowledge and belief and no related information is concealed. I am aware that if any of the above statements are found to be incorrect or false or any material information or particulars of relevance have been misstated, suppressed or omitted, I am liable to be disqualified for appointment and if appointed, my appointment will be liable to be terminated.”

Place: _____

.....
(Signature of the applicant)

Date: _____

Full Name: _____

**FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD
CLASSES APPLYING FOR APPOINTMENT TO POSTS UNDER THE
GOVERNMENT OF INDIA**

This is to certify that Shri./Smt./Kumari _____
son/daughter of _____ of village/town _____ in
District/Division _____ in the State / Union Territory
_____ belongs to the _____ community
which is recognized as a backward class under the Government of India, Ministry of Social
Justice and Empowerment's Resolution No. _____ dated _____.
Shri/ Smt./ Kumari _____ and/or his/her family ordinarily reside (s) in the
_____ District/Division _____ of _____ the
_____ State/Union Territory. This is also to certify that he/she does not
belong to the persons/sections (Creamy layer) mentioned in Column 3 of the schedule to the
Government of India. Department of Personnel & Training OM No. 36012/22/93-Est.(SCT)
dated 08.09.1993 and its subsequent revision through OM No. 36033/3/2004-Estt.(Res.) dated
9.3.2004 and 14.10.2010 and OM No. 36033/01/2013-Estt.(Res.) dated 27.05.2013.**

District Magistrate
Deputy Commissioner etc.

Dated:

Seal-

* The authority issuing the certificate may have to mention the details of Resolution of
Government of India, in which the caste of the candidate is mentioned as OBC.

** As amended from time to time.

Note: The term "Ordinarily" used here will have the same meaning as in Section 20 of the
Representation of the People Act, 1950.