GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI OFFICE OF THE MEDICAL SUPERINTENDENT BHAGWAN MAHAVIR HOSPITAL H-4/5, PITAMPURA, DELHI-110034. No. F3(213)/2017/BMH/S.R-J.R/Dental 7651 Dated-9816

Subject:- Recruitment to the post of Junior Resident(Dental) on Regular basis in Bhagwan Mahavir Hospital, GNCTD, Pitampura, Delhi-34.

Walk in interview will be held on as per the dates mentioned against their names at 09.30 A.M. in the office of the Medical Superintendent for selection/appointment of Junior Resident Junior Resident(Dental) on regular basis . However, the number of posts may vary and vacancies may be filled in phases.

Junior Resident

S.N o	Name o Specialty		No of vacant post for advertisement on regular basis		lar	Total	Date of Interview
		Gen	OBC	SC	ST		
1.	J.R (Dental)	02				02	19/09/19- For candidates whose first name starts from alphabet "A to M". 20/09/19- For candidates whose first name starts from alphabet "N to Z".

EDUCATIONAL QUALIFICATIONS:-

For Junior Resident(Dental):- BDS Degree from a recognized University/institution and must have not completed internship earlier than two years on the date of interview. Registration with Dental Council of India is compulsory.

AGE LIMIT:-

For J.R. -30 years for General (as on 30.09.2019). <u>EMOULUMENTS:-</u> For JR - 56,100/- in Level-10 (Rs. 15,600-39,100 G.P 5400 pre-revised).

<u>Tenure:-</u> For Junior Resident(Dental):- The tenure of junior residents is for a period of maximum one year only, including any service rendered as Junior Resident earlier on adhoc /regular basis in any recognized institution. The appointment will be initially for a period of six months that can be extended further for a period of six months subject to satisfactory performance, work and conduct report from concerned HOD.

Registration with Dental Council of India is Compulsory. Candidates having registration with the other state dental council will be allowed to appear for the interview, however, they will have to register themselves with Dental council of India , if appointed. Candidates must bring Photograph and a set of attested copies of all the certificates along with their originals for verification at the time of interview as following-

- 1. Date of Birth Certificate(Xth Class)
- 2. Dental Council of India/ State Dental Council.
- 3. Degree/Diploma Certificate.
- 4. Attempt Certificate.
- 5. Internship Certificate.
- 6. Mark-Sheets of all years.
- 7. Adhar Card/Voter Card/ Driving Licence/Vaild Passport.

General Conditions/requirements:-

- 1. The posts will be filled up in phases as per availability of vacancies and us per mark of the department. The number of vacancies as shown above may subject to change
- 2. Appointment shall be subject to medical filness and ventication of educational certificates.
- 3. No TA/DA will be paid for appearing in the interview
- 4. Hostel Accommodation is compulsory for Junior Resident

REPORTING TIME FOR INTERVIEW:- 09.30 A.M.W 11.30 A.M. AN above mentioned date in the Room No.-133, B.M. Hospital.

INR ALKA AGGARWAL) MEDICAL SUPDT. (CORD/MCH)

No. F3(213)/2017/BMH/S.R-J.R/Dental

Dreter

Copy forwarded to the following with the request to display the same on the Notice Board:-

- 1. To upload the website of H&FW Deptt. GNCT of Delhi.
- 2. Notice Board of B.M.H
- 3. P.A to M.S (For Information)

(DR. ALKA AGGARWAL) MEDICAL SUPDT. (CORD/MCH)

APPLICATION FORM FOR JUNIOR RESIDENT(DENTAL)

. Name of the candidate (in block letters)	Paste here duly
2. Father's/Husband Name	attested
3. Date of Birth	Passport size
Age as on (Date of interview)	Photograph
whether Belong SC/ST/OBC	
· r gysicall Challenged (Ves/No)	
. Postal Address	

D				
. Permanent Add	iress			
0.0				
Contact No.				
9. Valid DMC/E	DDC No			
10. Date of com	pletion of inte	ernship (For J.R. only)		
11. Academic Q	ualification			
	Year of	University/institution	% of	Nos. of attempts
	Passing	o in versity, institution	Marks	

- cooning	IVILLING	

12. Details of Work Experience:

Complete Address of employer	Designation/Post held	From	То

13. All the relevant certificates should be self attested

14. Aadhar Number

15. **Declaration:** - I solemnly declare that the above statement made by me are correct to the best of my knowledge and noting has been concealed thereof. If any information given above is found false/incorrect my candidature/service may be terminated. Dated:

Date : Place: Name of Candidate:

(Signature of the Candidate)

Email id (Should be in capital letter)