



GOVERNMENT OF HARYANA
Advertisement for filling up the posts for
S.H.K.M. Government Medical College, Nalhar, Nuh

In view of emergent situation due to COVID-19 pandemic, **15 posts of Specialist Doctors** are proposed to be filled up on purely contract basis, for SHKM GMC Nalhar, Nuh through Walk-in-Interview for 06 months extendable up to one year as per the requirement from eligible candidates. Walk-in-Interview will be conducted from 20-04-2020 onwards, on first cum first serve basis.

The other details like essential qualification, pay scales, fees, application form & other terms and conditions may be downloaded from institute website www.gmcnewat.ac.in. It is also informed that interested candidates may visit our website on regular basis because all updates regarding vacant seats will be updated on institute website i.e. www.gmcnewat.ac.in till all the posts are filled.

IMPORTANT INSTRUCTIONS:

1. The application form, eligibility criteria, qualification, experience, other terms & conditions can be downloaded from the official website of the institute www.gmcnewat.ac.in. Application form will not be provided by institute to anyone at the time of interview.
2. Age Limit: Upper age limit for Specialist Doctors will be 45 (Age may be relaxed in exigency).
3. Number of posts may be increased or decreased or totally withdrawn without any further notice.
4. The status of vacancy will be updated on the website www.gmcnewat.ac.in on regular basis till the post not filled. Interested candidates may regularly visit the institute website for updated status.
5. Applicants must reach O/o the Director, SHKM, GMC, Nalhar, Nuh on scheduled date with duly filled prescribed application form and supported documents. Submission of incomplete application form i.e. without self attested copies of testimonials of academic career, permanent registration certificate, attempt certificate etc. may render the candidate ineligible.
6. A passport-size photograph, duly attested should be affixed on the application form.
7. If the work and conduct of the candidates is not found satisfactory during the contractual period, his/her services will be terminated with immediate effect without giving any prior notice or without assigning any reason thereof.
8. Number of posts may be increased or decreased or totally withdrawn without any further notice.
9. No TA/DA will be paid to the candidates for attending the interview.
10. Original documents will be verified at the time of interview.

Eligible applicants have to appear for walk in interview from 20-04-2020 (Monday) onwards on first cum first serve basis till the vacant posts are available at 09:00 AM along with strictly prescribed application form and non refundable application fee of Rs. 500/- (Rs.125/- for reserved category of Haryana domicile only) in the form of Demand Draft / Indian Postal Order/ Treasury Challan in departmental receipt head 0210 in favour of Director, Shaheed Hasan Khan Mewati, Govt. Medical College, Nalhar (Nuh) payable at Nuh or by POS Machine.

| | |
|---------------------------------|--|
| Date/ time of Interview: | Every Day from 20-04-2020 (Monday) onwards at 10:00 AM (Attendance will be taken up to 11:00 am only, there after no candidate will be entertained) |
| Venue of Interview: | Office of Director, Shaheed Hasan Khan Mewati, Govt. Medical College, Nalhar, Nuh |

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Director

GENERAL TERMS AND CONDITIONS:-

- 1. Submission of incomplete application i.e. without self attested copies of testimonials of academic career, experience certificate, attempt certificate etc. may render the candidate ineligible.
- 2. The candidates who wish to apply for more than one specialty; they should submit separate application forms for each specialty.
- 3. The candidates will be engaged on fix salary as below.
- 4. The incumbents will be engaged purely on contract basis for a **period of Six months** extendable up to one year as per the requirement due to COVID-19.
- 5. Numbers of posts are liable to increase or decrease either way, including complete withdrawal.
- 6. The selection committee reserves the right to reject or accept any candidate without assigning any reason thereof.
- 7. Canvassing of any kind will be a disqualification.
- 8. The benefit of reservation, including the benefit of relaxation in upper age limit in respect of candidates belonging to reserved category, will be as per Haryana Govt. instruction issued from time to time and is restricted to Haryana domiciles only.
- 9. Persons with benchmark disability will be exempted for application fee subject to enclosure of necessary certificate from a competent authority in support of their claim of disability as per notification No. 22/10/2013-1GSIII dated 25-04-2018.
- 10. All disputes will be subject to jurisdiction of Nuh.

Qualifications & Experience:-

| S. No | Specialist Doctors | Essential Qualification | Number Required | Consolidated pay per person per month (in Rs.) |
|-------|--------------------|---|-------------------------|--|
| i) | Anaesthesia | MBBS Degree with MD/MS/DNB/Diploma in concerned subject | 05 | 2,00,000 |
| ii) | General Medicine | MBBS Degree with MD/MS/DNB/Diploma in concerned subject | 03 | 2,00,000 |
| iii) | Chest & TB | MBBS Degree with MD/MS/DNB/Diploma in concerned subject | 03 | 2,00,000 |
| iv) | Radiologist | MBBS Degree with MD/MS/DNB/Diploma in concerned subject | 4 (GC-02, SC-01, PH-01) | 2,00,000 |

***For DNB/Dip candidates, qualification, experience and equivalence will be as per latest MCI guidelines. However Haryana Medical Teacher Rules for the Government Medical Colleges of Haryana are under consideration with the Government. As and when the rules are implemented, it will be applicable to all the appointments in the present advertisement.**

- Note:-**
- 1. The degree/diploma of undergraduate/postgraduate/DM/M.CH not recognized by the MCI will render the candidate ineligible.
 - 2. The qualification and experience will be counted till the date of interview.
 - 3. Details of the Research Work Publications (in annotated form) indicating index/non-index along with attested copies and best five research works along with citations supported by relevant document, must also be furnished. Any other relevant out.

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Director

DOCUMENTS CHECK LIST FOR SPECIALIST DOCTORS

NAME:

DEPARTMENT:

| S.NO | DOCUMENT | CHECKED |
|------|---|---------|
| 1. | DEGREE (MD / MS / PG DIPLOMA) | |
| 2. | ATTEMPT (MD /MS / DIPLOMA) | |
| 3. | MCI /STATE REGISTRATION (UG and PG) | |
| 4. | POST-PG EXPERIENCE CERTIFICATE (INCLUDING FELLOWSHIP) | |
| 5. | PUBLICATIONS/ PRESENTATIONS/ AWARDS/ MEDALS | |
| 6. | MBBS DEGREE/ PROVISIONAL | |
| 7. | MBBS MARKS CERTIFICATES | |
| 8. | MBBS ATTEMPT CERTIFICATE | |
| 9. | PROOF OF MCI RECOGNITION OF DEGREE/ COLLEGE | |
| 10. | DOB CERTIFICATE | |
| 11. | CASTE CERTIFICATE(if any) | |
| 12. | OTHER ACHIEVEMENTS CERT. | |
| 13. | PAN CARD | |

Scrutinizer:

APPLICATION FORM

Category No. _____

Challan / IPO/ DD No.:_____

Application for the post of _____

Dated: __/__/__

Department: _____

Issuing authority: _____

1. Name of Candidate (in block letter) _____
(As per Matriculation / Hr. Secondary or any equivalent exam certificate)

2. Father’s Name (in block letter) _____

3. (a) Permanent Address:- _____

(b) Correspondence Address:- _____

Paste your
passport size
recent
photograph
duly attested

Contact No/ Mobile No (Mandatory)

+91

Alternative Contact No.

+91

4. E-mail id (Mandatory)

5. Date of Birth: -----/-----/19-----

Age: Years.....Months.....Days..... (As on last date of submission of application)

6. Marital Status _____ Spouse (job/qualification):_____

7. Category: Unreserved / GC_____ or Reserved (specify):_____ of Haryana only.

8. Examination Passed:

| Name of the Examination | Month & Year of Passing / Completion | Duration in days/ months/ years | No. of extra attempts | Marks Obtained | Maximum Marks | Name of Institution/ University |
|---|--------------------------------------|---------------------------------|-----------------------|----------------|---------------|---------------------------------|
| Matric/10 th /S.S.L.C. or Equivalent | | | | | | |
| 10+2/SSC or Equivalent | | | | | | |
| A) First Prof. Second Prof. Final Prof. Part-I/ Pre-final Part-II | | | | | | |
| B) Internship Completion | | | | | | |
| Aggregate Marks of all Profs. | | | | | | |
| Aggregate % of Marks of all Profs. | | | | | | |

9. Particulars of House Job / Experience:-

| S.NO | Name of medical college/ Hospital | Specialty | Date of Joining | Date of Relieving | Duration |
|------|--------------------------------------|-----------|--------------------|----------------------|----------|
| 1 | | | | | |
| 2 | | | | | |

10. Post Graduate Qualification:

| Name of Degree/ Diploma | Name of Institution/ University | No of extra attempt | Date of Joining | Date of Passing | Duration in dd/mm/yy | Aggregate %age |
|---|------------------------------------|------------------------|--------------------|--------------------|-------------------------|-------------------|
| i) PG Diploma | | | | | | |
| ii) PG Degree | | | | | | |
| iii) DNB/ others(i.e. M. Sc) | | | | | | |
| iv) Additional Qualifications i.e. D.M/ M.Ch/ Ph. D | | | | | | |

11. Particulars of Post PG Experience (In MCI Recognised/ Approved Medical College/Institute only):-

| S.NO | Name of Medical College/Teaching Institute | Specialty/ Designation | Date of Joining | Date of Relieving | Duration in days/months/yrs |
|------|---|---------------------------|--------------------|----------------------|--------------------------------|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |

12. ACADEMIC ACHIEVEMENTS:

- Best graduate (1st in aggregate in all profs. Exams combined)

YES/NO
- 2nd Best graduate (1st in aggregate in all profs. Exams combined)

YES/NO
- 1st position in any subject in University exams (During Graduation)

YES/NO
- 2nd position in any subject in University exams (During Graduation)

YES/NO
- PG Degree with Distinction/ Any Medals

YES/NO

13. RESEARCH ACHIEVEMENTS:

(1) PUBLICATIONS:

a) Paper published /accepted for publication in an **indexed international journal**.

| S. No. | Title of Article / Case report | ISSN No. and Name of the Journal and Publisher (published / accepted) | Indexing of the journal e.g. Pub med | As 1 st author/ 2 nd author OR Co- author | Designation while publishing |
|--------|--------------------------------|---|--------------------------------------|---|------------------------------|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |

b) Paper published / accepted for publication in an **Indian and State Journal with ISSN No.**
(Abstract of Paper presented in a conference will not be counted as a publication)

| S. No. | Title of Article / Case report (As 1 st author or Co- author) | ISSN No. and Name of the Journal whether published /accepted (mention the edition) | Designation while publishing |
|--------|--|--|------------------------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |

14. EXTRACURRICULAR ACTIVITIES:

A) **Sports And Cultural Activities** (colours / athletic meet/ cultural meet)

| S. No. | Name of Sport/ Cultural Event | Level whether International/ National/ Interuniversity/ University (inter-college) | Position First/ Runner up |
|--------|-------------------------------|--|---------------------------|
| 1 | | | |
| 2 | | | |

B) **Blood Donation:** (at Medical College/Govt./Red Cross Blood Banks only)

15. Are you:

- a) A citizen of India by birth or by domicile _____.
- b) A person having migrated from Pakistan with the intension of permanently setting in India or a subject of Nepal of Sikkim or Subject of a Portuguese in India
- c) *Scheduled Caste of Haryana
- d) *Backward Class candidate of Haryana
- e) *Ex-serviceman/Serving Soldier _____
Certificate to this effect from competent authority should be attached.

16. Is or was you father*

a) A citizen of India by birth or by domicile.

b) A person having migrated from Pakistan with the intension of permanently setting in India or a subject of Nepal of Sikkim or Subject of a Portuguese in India

*Answer “Yes” or “No” and cancel the words which are not applicable.

17. Are you a Government Servant? If yes, whether

1) Permanent or Temporary

2) Designation/Post

3) Govt./Private

4) Present pay and allowance

18. Have you ever been disqualified by

a) Union Public Services Commission

b) Haryana Public Service Commission

c) Any other State Public Service Commission

d) Any other Govt. Department, if yes full particular and post held, reason for removal/dismissal with period.

19. Have you ever been removed / dismissed from Govt. Service or compulsory retire, if so full details be given?

20. Are you willing to accept the minimum initial pay offered? If not, what lowest initial pay would be acceptable?

21. If selected what notice would you required for joining?

22. Give below the names of two persons who are in a position to testify from personal knowledge you fitness for post (they must not be related to you)

Name

Status

Address

Name

Status

Address

DECLARATION

I s/o/d/o/w/o..... R/o.....
..... hereby declare that information given below is correct to the best of my knowledge & belief:

- 1. That all the degrees/diploma/Other educational qualification/experience constituting essential qualification, as per the advertisement, submitted by me in support of this application are recognized by Medical/Dental Council of India or such body as is competent to recognize such a degrees/diploma/Other educational qualification/experience in India.
- 2. That I possess the requisite experience, as per the advertisement for the post that I have applied for from an institution recognized by the competent body in India.
- 3. That if at any stage, this declaration is found to be false than the interview and all subsequent actions to it may be considered void ab-initio besides any such administrative or legal action by competent authority deemed for, including recovery of financial loss sustained due to the false declaration.

Place:-.....

Date:-.....

SIGNATURE

List of enclosures:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.
- 11.
- 12.
- 13.
- 14.
- 15.

Please write your complete correspondence address:

Name _____

Address _____

Pin Code _____