OFFICE OF PRINCIPAL, GOVT. DOON MEDICAL COLLEGE, PATEL NAGAR, DEHRADUN- 248001 UTTARAKHAND TEL: 0135-2726020-2726021

Email: doonmedicalcollege@gmail.com

Ref. No.: GDMC/Advt./Residents/2022/ 6756

Dated: 17 -12-2022

WALK IN INTERVIEW FOR BROAD & SUPER SPECIALITY SENIOR RESIDENT / JUNIOR RESIDENT RECRUITMENT IN GOVT. DOON MEDICAL COLLEGE HOSPITAL, DEHRADUN, UTTARAKHAND

A walk-in interview for BROAD & SUPER SPECIALITY SENIOR RESIDENT / JUNIOR RESIDENT will be held in the office of Principal, Government Doon Medical College, Patel Nagar, Dehradun on 19th December, 2022 from 10:00 AM to 02:00 PM. Reporting time 10:00 am to 1:00 pm. vacancies in various departments are as follows:

Senior Residents:- (Anesthesia, Gen. Medicine, Gen. Surgery, Obs. & Gynae, Pediatrics, PMR, Dentistry, Emergency Medicine, Radio-diagnosis)

Senior Residents (Super Speciality Depts.):- Anesthesia, Cardiology, Nephrology, Neurology, Plastic Surgery, Urology.

Junior Residents :- (General Medicine, General Surgery, ENT, Pediatrics, PMR, Orthopedics, Anesthesia, Obs. & Gynae.)

Salary: Senior Resident Rs 84,113/-pm, Junior Resident Rs. 71,257/-pm Qualification:- As per NMC norms.

Reservation: - As per Rule of Uttarakhand Govt.

Note:- Number of vacancies shall be subject to Institute requirement.

Principal,

Govt. Doon Medical College, Dehradun.

APPLICATION FORM GOVT. DOON MEDICAL COLLEGE. DEHRADUN, UTTARAKHAND

App	lication for the post of				
1.	Name of the applicant (In	Block Letters)		***************************************	RECENT COLOURED
2.	Sex :	***************************************			PHOTOGRAPH
3,	Father's Husband's Name				
4.	Category :				
5.	Date of Birth & Age (Plea	ase attach self-attested photo	copy of Sec	ondary School Certificate):
6.	Aadhar Card No.:		*****		
7.	PAN:				
8.	Permanent Address-				
	124				
				-	
9.	Correspondence Addre	ess :			
		La marantaga de la compansión de la comp			
10.	Email (In block letters)):			Dation titles
11.	Mobile Number :				
2.	Date of appearance in Las	t MCl - UG / PG / any other	Assessment	£	
13.	ACADEMIC QUALIFIC (Please attach self-attested registration certificate for	photocopy of MBBS/MD/N	us/DM/M.C	h./M.Sc./Ph.D. degree ce	rtificate and copy of
	Qualification	College/ University	Year of Passing	Registration No. of UG & PG with date	Name of the State Medical Council
	MBBS				
	MD/MS/DNB/Ph.D.				
(S	peciality)				
	M.Sc. / Ph.D.				
(S)	peciality)			ALC: T	
	DM M.Ch.				
(St	peciality)				

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14. DETAILS OF THE PREVIOUS APPOINTMENTS TEACHING EXPERIENCE.

Designation	Department	Name of Institution/ University	From DD/MM/YY	To DD/MM/YY	Total Experience in years & months
Tutor/ Demonstrator					
Junior Resident					
Registrar					
Senior Resident					
Assistant Professor					
Associate Professor					
Professor					

15.	Details of publication (Please attach self-attested copy of publications along with proof of indexing)
a)	National (Number) :
b)	International (Number):

- 16. MCI Basic course training workshop (Please attach self-attested photocopy of certificate) Yes / No
- If Under obligation of Essential State Service Bond in any State of India, "No Objection Certificate' from present employer attached - Yes / No



Declaration by the Candidate

It is declared that each statement and/or contents of this and/or documents, certificates submitted along with the application form, by the undersigned are absolutely true, correct and authentic. In the event of any statement made in this declaration subsequently turning out to be incorrect or false, the undersigned has understood and accepted that such misdeclaration in respect to any content of this declaration shall also be treated as a gross misconduct thereby rendering the undersigned liable for necessary disciplinary action.

Date:

Signature of Candidate

Place:

Enclosures:

S.No	Documents	Submitted
1.	Recent Passport size photo of the Employee, Signed by Dean / Principal of the college.	Yes / No
2.	Photo ID proof issued by Govt. Authorities : Passport / PAN Card / Voter ID / Aadhar Card	Yes / No
3.	Certified copies of present appointment order at present Institute.	Yes / No
4.	Copy of Passport /Voter Card /Electricity Bill /Telephone Bill / Aadhar Card attached as a proof of residence.	Yes / No
5.	Copies of Degree certificates of MBBS and PG degree.	Yes / No
6.	Copies of Registration of MBBS and PG degree.	Yes / No
7.	Copy of experience certificate for all teaching appointments held before joining present institute.	Yes / No
8.	Relieving order from the previous institution.	Yes / No
9.	PAN Card	Yes / No
10.	Copy of Aadhar Card	Yes / No

Date:

X

Signed of the candidate