

**राजकीय दून मेडिकल कॉलेज,
देहराखास, पटेल नगर, देहरादून।**

राजकीय दून मेडिकल कॉलेज, देहरादून में दिनांक 17 अक्टूबर, 2026 (शनिवार) अपराह्न 02.00 बजे को आयोजित संविदा के आधार पर माइक्रोबायोलॉजी विभागान्तर्गत वाइरल रिसर्च एण्ड डायग्नोस्टिक लैबोरेट्री (VRDL) में रिसर्च साइंटिस्ट-बी के पद हेतु
वॉक-इन-इंटरव्यू

S. No.	Name of Post	No. of Post	Emoluments (as per norms in Rs.)	Educational Qualification	Experience
1	Research Scientist-B (Medical)	01	67,000+HRA	MBBS, MD (Microbiology) (Increment as admissible as per DST norms.)	Minimum 5 years of active working in molecular lab.

उक्त पद हेतु सुयोग्य अभ्यर्थी उपलब्ध न होने की स्थिति में रिसर्च साइंटिस्ट-बी (मेडिकल) श्रेणी के रिक्त पद को रिसर्च साइंटिस्ट (नॉन-मेडिकल) श्रेणी में वैकल्पिक व्यवस्था के अंतर्गत अस्थायी रूप से भरा जायेगा, जिसकी नियम व शर्तें निम्नलिखित हैं -

S. No.	Name of Post	No. of Post	Emoluments (as per norms in Rs.)	Educational Qualification	Experience
1	Research Scientist-B (Non-Medical)	01	56,000+HRA	M.Sc. (Microbiology) with or without P.h.D. (Increment as admissible as per DST norms.)	Minimum 10 years of active working in molecular lab.

नोट-उक्त साक्षात्कार के समय निर्धारित प्रारूप को भरकर अपने समस्त शैक्षिक अभिलेखों प्रतिलिपि/फोटोग्राफ तथा मूल शैक्षिक अभिलेखों सहित निर्धारित 01 घण्टा पूर्व उपस्थित होना सुनिश्चित करें।


प्रो० (डॉ०) गीता जैन,
प्राचार्या।

APPLICATION FORM
DEPARTMENT OF MICROBIOLOGY
GOVT. DOON MEDICAL COLLEGE, DEHRADUN, UTTARAKHAND

Application for the post of _____

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1. Name of the applicant (In Block Letters).....
2. Sex :
3. Father's/ Husband's Name :
4. Category :
5. Date of Birth & Age (Please attach self-attested photocopy of Secondary School Certificate):
6. Aadhar Card No.:.....
7. PAN:
8. Permanent Address-

9. Correspondence Address :

10. Email (In block letters):
11. Mobile Number : _____
12. **ACADEMIC QUALIFICATIONS -** _____

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

Check List :-

<u>S.No</u>	<u>Documents</u>	<u>Submitted</u>
1.	Recent Passport size photo of the Candidate	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 & M.Sc & PhD.	Yes / No
6.	Copies of Registration of MBBS and PG degree.	Yes / No
7.	Copy of experience certificate for all 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
11.	NOC of current employer	Yes / No

Date :

Signature of the candidate

Place: