#### BANARAS HINDU UNIVERSITY

(Established by Parliament by Notification 225 of 1916)

#### NOTIFICATION FOR JOB

Applications are invited for the walk in interview for Various Posts (contractual) on the prescribed proforma for the Ministry of Health & F.W., Govt. of India Sponsored "National Programme for Health Care of Elderly (NPHCE)" at Department of Geriatric Medicine, Institute of Medical Sciences, BHU, Varanasi – 221005 under Prof. Anup Singh, Department of Geriatric Medicine, Nodal Officer. (Development Scheme No-NPHCE-4191).

- The application form and other details given below.
- 2. No TA/DA will be paid for attending walk in interview.
- 3. Incomplete application form will not be entertained.
- 4. Applicant should report along with original documents and a set of self-attested photocopies, for interview on mentioned date at 11.30 AM in the office of Regional Geriatric Centre, 2<sup>nd</sup> floor IMS, BHU.
- 5. Application can be given in Hindi or English.
- 6. Those who are in service should apply through proper channel.
- Candidate with experience of work in the area of the old age health care (Geriatric) or Related field will be preferred.
- 8. All things being equal, SC/ST candidates will be preferred as per GOI/BHU guidelines.
- 9. Degrees must be from the recognized Institution/University.
- Reservation for reserved category will be done as per University rules as for the project.
- 11. Seats may be increased or decreased at the time of interview.

#### Note:-

- 1. Date of walk in interview: 18.01.2023
- 2. Timing: 02.00 PM
- 3. Venue: Office of Regional Geriatric Centre Room No. 1363-A, 2nd Floor IMS, BHU

Prof. Anup Singh (Nodal Officer) Deptt. of Geriatric Medicine. Institute of Medical Sciences Banaras Hindu University Varanasi -221005 (UP)

NODAL OFFICER
NPHCE - RGC
Devp. Scheme No - 4191
IMS, BHU, Varanasi - 5

### 12. The details of the post and salary are as follows:

| S. No. | Name of Post                                       | Vacancy | Salary & Wages (consolidated) Per month in Rs. |
|--------|--|---------|--|
| 01.    | Medical Officer / Junior<br>Resident (contractual) | 01      | 80,000/- (Fix)                                 |
| 02.    | Senior Resident<br>(contractual)                   | 02      | 1,00,000/- (Fix)                               |

#### NOTE:

- 1. The posts are purely contractual and extension will be provided as per NPHCE Norms based on work satisfaction on quarterly basis.
- 2. The qualification in exceptional situation will be relaxed by the Selection Committee/Nodal Officer & his decision will be final.
- 3. The services of applicants can be terminated at one month notice if work or behavior is found unsatisfactory.
- 4. The Nodal Officer reserves the right to cancel/modify or invite any person as per requirement of the Scheme.
- 5. Age Limit: As per BHU rules, relaxable in exceptional circumstances & the decision of the Nodal Officer will be final.

## 13. Details of qualification for the post & format of Application forms are as follows:

| S. No. | Name of Post  | No. | Qualification   |
|--------|---|-----|---|
| 01.    | Medical Officer /<br>Junior Resident<br>(Contractual) | 01  | *E.Q. – i. MBBS from a MC1 recognized Institution.  ii. One year Rotatory Internship.  *D.Q. –  Experience of working in Geriatric Medicine Unit.  Training in geriatric medicine |
| 02.    | Senior Resident<br>(Contractual)                      | 02  | *E.Q. – i. MD Medicine/Geriatric Medicine  *D.Q. –  Experience of working in Geriatric Medicine Unit.  Training in geriatric medicine   |

Date of determining eligibility -30th January 2023

All communication will be done by specified e-mail id/Mobile number in future.

\*E. Q.: Essential Qualification. D. Q.: Desirable Qualification



## BANARAS HINDU UNIVERSITY

### APPLICATION FORM

# NPHCE - Regional Geriatric Centre, IMS, BHU

| Post Applied for   | Adv. No. 05 NPHCE 202223 |
|--|--------------------------|
| 1. Name (In Block Letters):  2. Present Designation:  3. Date of Birth:  4. Gender (Male | Passport size Photo      |
| 5. Father's Name/Husband's Name:   |                          |
| 6. Mother's Name:  |                          |
| 7. Marital Status:   |                          |
| 8. Nationality:  |                          |
| 9. Indicate, if SC/ST/OBC:   |                          |
| 10. Address for Correspondence (with Pin code):  |                          |
|  |                          |
|  |                          |
| Telephone No. (With STD Code):*  |                          |
| *E-mail: (mandatory)   |                          |
| 11. Permanent Address (with Pin code)  |                          |
|  |                          |
| Telephone No. (With STD Code):   |                          |
| E-mail: (mandatory)  |                          |
| 12. Distinctions/Prizes/Awards/Medals/Honors etc.  |                          |
| 13. Whether you are conversant with Computer (Sp   |                          |
|  |                          |

| 14 Ac | ademic | Qual | ification | s (Ma | tric | onward | s): |
|-------|--------|------|-----------|-------|------|--------|-----|
|-------|--------|------|-----------|-------|------|--------|-----|

| Examination Passed                        | Board/University | Year of<br>Passing | Percentage<br>of Marks<br>Obtained | Division/Class<br>/Grade/Merit |
|---|------------------|--------------------|------------------------------------|--------------------------------|
| High School/Matric or<br>Equivalent       |                  |                    |                                    |                                |
| Intermediate/Hr. Sec. /PUC or equivalent  |                  |                    |                                    |                                |
| MBBS/B.Sc. / B. Tech. or<br>Equivalent    |                  |                    |                                    |                                |
| M.D. / M. Sc. / M. Tech. or<br>Equivalent |                  |                    |                                    |                                |
| Other Examinations, if any                |                  |                    |                                    |                                |

# 15. Appointments held or Experience, if any:

| Designation &<br>Name of<br>Institution | Date    |         | Salary with<br>Grade | Nature of<br>Duties | Reason for<br>leaving |
|---|---------|---------|----------------------|---------------------|-----------------------|
|   | Joining | Leaving |                      |                     |                       |
|   |         |         |                      |                     |                       |

### 16. Additional Information, if any (please use separate sheet):

#### 17. Declaration: I declare that:

- 1. The information's given above are complete and correct; 2. Neither any disciplinary proceeding is Pending nor contemplated against me; 3. I have never been dismissed from service nor debarred from holding any future appointment nor convicted for any offense. No criminal case is pending against me.
- 4. In case of concealment/ suppression of facts (s), which may be detected at any stage in future, my appointment is liable to be cancelled/terminated, as the case may be, without notice.

| Date: | Signature of the Applicant |
|-------|----------------------------|
|       |                            |

18. Endorsement by Employer: