

POSTGRADUATE INSTITUTE OF MEDICAL EDUCATION AND RESEARCH,
CHANDIGARH

DEPARTMENT OF INTERNAL MEDICINE



Sanjay Jain
Dated: 03.12.2022

WALK-IN-INTERVIEW FOR THE POST OF NON ACADEMIC JUNIOR RESIDENT ON ADHOC BASIS

Applications are invited for a walk in interview for filling-up 10 (ten) vacant posts of Non Academic JUNIOR RESIDENT purely on adhoc basis for six months from the date of appointment in the Department of Internal Medicine. The interview will be conducted on 15.12.2022 (Thursday) at 10 AM in the office of Head, Department of Internal Medicine, PGI, Chandigarh (Block F, 4th Floor, Nehru Hospital). The candidates who fulfill the following eligibility criteria are requested to attend the same along with the fully filled proforma (as attached), original certificates/testimonials and one set of Bio-data, photocopy of certificates and latest coloured photograph. No separate interview letter will be sent and No TA/DA will be given for attending the interview.

01	Name of the post	Non Academic Junior Resident
02	No. of posts	10 (ten)
03	Pay scales	As per PGI rules
04	Qualification	MBBS with one year completed rotating internship completion certificate Certificate of registration with central/State Medical Council Candidates should be post MBBS instead of post MD/MS
05	Registration	Central/State Medical Registration Council
06	Age Limit	As per PGI rules

Sanjay Jain
(Sanjay Jain)
3-12-22

Encl: Application form for the post of Non-Academic Junior Resident on adhoc basis.

Copy to: P.S. to DPGI for information of DPGI
PA to Dean (Academic), PGI, Chandigarh
All Notice Boards, PGI, Chandigarh
The Incharge, PGI Website with the request to upload this notice on PGI website.
Director-Principal, Govt. Medical College, Sector 32, Chandigarh
Director, Health Services, General Hospital, Sector 16, Chandigarh

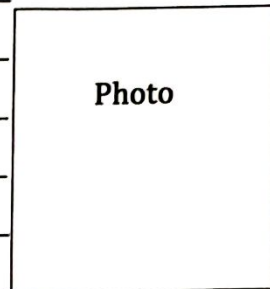
POSTGRADUATE INSTITUTE OF MEDICAL EDUCATION & RESEARCH, CHANDIGARH

**APPLICATION FORM FOR THE POST OF NON-ACADEMIC JUNIOR RESIDENT
IN THE DEPARTMENT OF _____ ON AD-HOC BASIS.**

1. Name : _____
2. Father's Name : _____
3. Father's Occupation : _____
4. Date of Birth : _____
5. Nationality _____ Marital Status _____
6. Name & Occupation of Spouse (if married) _____
7. Present Address : _____

8. Permanent Address : _____

09. Whether belong to SC/ST/OBC/PwBD _____
10. Qualification : _____



Examination passed	Name of the Institute or University	Month & Year when passed	Attempts at which passed	Roll No.
1 st Professional MBBS				
2 nd Professional MBBS				
3 rd Professional MBBS				
Final Professional MBBS				

INTERNSHIP COMPLETION DATE _____
 PERCENTAGE OF MARKS OBTAINED IN FINAL MBBS EXAMINATION _____

11. Permanent Registration with the Medical Council of India: _____
 State in which Registered: _____
12. Experience, if any: _____

Sr. No.	Post held	Name of the Hospital/Institute	Period		Total Period
			From	To	
Total Working Experience (Years/Months/Days)					

13. Contact No.: _____
 e-mail ID (written clearly in bold letters): _____

I hereby declared that the information given above is true to the best of my knowledge and belief. If any information is found to be false, I shall be responsible for the consequences.

Dated: _____ (Signature)

NB: Candidate may supply details of their academic achievements like position obtaining in the various professional MBBS examinations. Medals received if any, Academic Merit, Scholarship etc. They may also intimate the detail of the extra-curricular activities. The details may be given on a separate sheet.

* Please attach certificate in support of the above.