#### DRAFT FOR APPROVAL Advt. No.01/2023

# Maharashtra University of Health Sciences, Nashik's Maharashtra Post Graduate Institute Of Medical Education & Research Dindori Road, Mahasrul, Nashik- 422004

**Phone No.:-** 0253-2997296 **E-mail :-** mpgi@muhs.ac.in

Website: www.mpgimer.edu.in

#### **RECRUITMENT OF VARIOUS MEDICAL TEACHERS**

A) As per the MUHS Act 1998, Provision 9(2)(e)1 & 27(q) Applications are invited for the tenure posts of 5 years on Saral basis. The probation will be of 2 years.

| NO.                                       | SUBJECT                          |  | PROFESSOR | ASS | OCIATE PROFESSOR                                     | AS | SSISTANT PROFESSOR  |  |
|---|----------------------------------|--|-----------|-----|--|----|---|--|
| 01  | MEDICAL<br>SUPERINTENDENT        | 01   | 01 (EWS)  | -   | -  | -  | -   |  |
| 02  | GENERAL<br>MEDICINE              | 01   | 01 (Open) | 04  | 02 (Open),01(SC),<br>01(NT-B)                        | 07 | 03 (Open),01(SC), 01(ST),<br>02(OBC)                      |  |
| 03  | PAEDIATRICS                      | 01   | 01 (Open) | 02  | 01(Open),01 (OBC)                                    | 03 | 02 (Open),01(OBC)   |  |
| 04  | GENERAL<br>SURGERY               | 01   | 01 (Open) | 04  | 01 (Open),01 (ST)<br>01 (SC),01 (EWS)                | 07 | 02 (Open), 01(SC),<br>01(OBC),01(ST), 01(NT-B)<br>01(EWS) |  |
| 05  | ORTHOPAEDICS                     | 01   | 01 (Open) | 02  | 01(SC),01 (Open)                                     | 03 | 02 (Open), 01(SC)   |  |
| 06  | ANAESTHESIA                      | 01   | 01 (Open) | 03  | 02(Open) 01(SBC)                                     | 05 | 02 (Open),01(ST),<br>01(OBC), 01(EWS)                     |  |
|   | OBST. & GYNAEC.                  | 01   | 01 (SC)   | 02  | 01(Open) 01(SC)                                      | 03 | 02 (SC),01(Open)  |  |
| 07  | Antenatal M. O.                  | -  | -         | -   |  | 01 | 01 (OBC)  |  |
| <u> </u>                                  | Maternity and Child Welfare M.O. | -  | -         | -   |  | 01 | 01 (OBC)  |  |
| 08  | EMERGENCY<br>MEDICINE            | 01   | 01 (SC)   | 01  | 01 (Open)  | 02 | 01 (Open),01 (SC)   |  |
| 09  | Pathology                        | 01   | 01 (OBC)  | 05  | 01 (Open),01 (NT-C)<br>01 (OBC),01 (Open)<br>01(EWS) | 05 | 01 (Open), 01 (SC),<br>01 (OBC),01 (SBC),<br>01 (EWS)     |  |
| 10  | Microbiology                     | 01   | 01 (NT-C) | 02  | 01 (Open)<br>01 (EWS)                                | 03 | 01 (Open),01 (NT-C)<br>01 (OBC)                           |  |
| 11  | Biochemistry                     | 01   | 01 (ST)   | 02  | 01 (ST),01 (OBC)                                     | 02 | 01 (Open),01 (ST)   |  |
| 12  | Radiology                        | 01   | 01 (OBC)  | 02  | 01 (SC),01 (OBC)                                     | 02 | 01 (Open),01 (NT-C)                                       |  |
| 13  | ENT                              | 01   | 01 (VJ-A) | 02  | 01 (NT-D),01 (OBC)                                   | 03 | 01 (Open),01 (OBC),<br>01 (EWS)                           |  |
| 14  | Ophthalmology                    | 01   | 01 (OBC)  | 02  | 01 (OBC),01 (VJ-A)                                   | 03 | 01 (Open),01 (VJ-A),<br>01 (EWS)                          |  |
| 15  | Forensic Medicine                | 01   | 01 (Open) | 02  | 01 (Open),01 (OBC)                                   | 02 | 01 (Open),01 (NT-D)                                       |  |
| Reservation for Persons with Disabilities |                                  | 02 02  |           |     |  |    |   |  |
| समांतर आरक्षण                             |                                  | *प्राध्यापक (Professor)- महिलांकरिता अजा व इमाव प्रवर्गातून प्रत्येकी एक पद व अराखीव प्रवर्गातून दोन पदे  *सहयोगी प्राध्यापक (Asso. Professor) - महिलांकरिता अज, आदुघ प्रवर्गातून प्रत्येकी एक पद, अजा, व इमाव प्रवर्गातून प्रत्येकी दोन पदे व अराखीव प्रवर्गातून चार पदे.  *सहय्याक प्राध्यापक (Asst. Professor) - महिलांकरिता अज, भज (क) प्रवर्गातून प्रत्येकी एक पद, अजा, आदुघ प्रवर्गातून प्रत्येकी दोन पदे, इमाव प्रवर्गातून तीन पदे, व अराखल प्रवर्गातून सहा पदे.  *वरील प्रमाणे उमेदवार उपलब्ध न झाल्यास पात्र उमेदवारांमधून सदर पदे भरण्यात येतील. |           |     |  |    |   |  |

#### 1. POST - PROFESSOR :-

| Sr.<br>No. | Subjects               | Qualification   | Full time teaching Experience as per<br>Council   |
|------------|------------------------|---|---|
| 1          | General Medicine       | M.D. (Medicine)/M.D. (General<br>Medicine)/DNB(Medicine/General<br>Medicine)  | As per notification dated 12/02/2020 (I) Associate Professor in the subject for 3 years in a permitted /Approved  |
| 2          | Paediatrics            | M.D. Pediatrics/DNB Pediatrics  | /recognized medical college /institution with three Research publications (atleast  |
| 3          | General Surgery        | M.S. Surgery/ M.S. General<br>Surgery/DNB (Surgery/General<br>Surgery)  | two as Associate Professor) (only original papers, meta-analysis, systematic reviews, and case series that  |
| 4          | Orthopaedics           | M.S. Orthopedics/DNB (Orthopedics)  | are published in journals included in Medicine, Pubmed Central, Citation  |
| 5          | Obst. &<br>Gynaecology | M.D. (Obst. & Gynaecology)/M.S. (Obst. & Gynaecology)/DNB (Obst. & Gynaecology)/  | index, Sciences Citation index, Expanded Embase, Scopus Directory of Open access journals(DoAJ) will be   |
| 6          | Anesthesiology         | M.D. Anesthesiology/M.S.<br>Anesthesiology/DNB<br>Anesthesiology  | considered).  The Author must be amongst first three or should be the corresponding author.  (II) Should have completed the basic   |
| 7          | Emergency<br>Medicine  | M.D. (Medicine)/M.D. (General Medicine)/ M.S. Surgery/ M.S. General Surgery/M.D. Respiratory Medicine/ M.D. Anesthesiology/M.S. Anesthesiology/ M.S. Orthopedics/DNB(Medicine/General Medicine/Surgery/Respiratory Medicine/ Anesthesiology/ Orthopedics) With two Years Training in Emergency Medicine | course in Medical Education Technology from Institutions(s) designated by MCI. (III) Should have completed the basic course in biomedical research from institution(s) designated by MCI. |
| 8          | Pathology              | MD (Pathology)  | Institutions Regulations, 1998" as prevailing before issuance of this   |
| 9          | Microbiology           | MD (Microbiology)   | notification.  OR   |
| 10         | Biochemistry           | MD (Biochemistry)   | As per the notification dated   |
| 11         | Rediology              | MD (Rediology)  | 31.10.2018:- Associate professor in the subject for   |
| 12         | ENT                    | MD (ENT)  | 3 years in a permitted/approved/ recognized medical college / institution   |
| 13         | Opthalmology           | MD (Opthalmology)   | with 4 Research Publications in Indexed journals on Cumulative basis with   |
| 14         | Forensic<br>Medicine   | MD (Forensic Medicine)  | minimum of 2 Research Publications during the tenure of Associate Professor as I <sup>st</sup> Author or as corresponding author.   |

#### 2. POST - ASSOCIATE PROFESSOR:

| Sr.<br>No. | Subjects               | Qualification  | Full time teaching Experience as per Council  |
|------------|------------------------|--|---|
| 1          | General Medicine       | M.D. (Medicine)/M.D. (General<br>Medicine)/DNB(Medicine/General<br>Medicine)   | As per the notification dated 31 OCT 2018:- As Assistant Professor in the subjet for 4 years in a   |
| 2          | Paediatrics            | M.D. Pediatrics/DNB Pediatrics   | permitted / Approved / recognized medical college /institution with 2   |
| 3          | General Surgery        | M.S. Surgery/ M.S. General<br>Surgery/DNB (Surgery/General<br>Surgery)   | Research publications in indexed, journals as 1st Author or as corresponding author.  |
| 4          | Orthopaedics           | M.S. Orthopedics/DNB (Orthopedics)   | OR As per the notification dated 12   |
| 5          | Obst. &<br>Gynaecology | M.D. (Obst. & Gynaecology)/M.S. (Obst. & Gynaecology)/DNB (Obst. & Gynaecology)/   | Feb. 2020:- (I) As Assistant Professor in a subject for 4 years in a  |
| 6          | Anesthesiology         | M.D. Anesthesiology/M.S.<br>Anesthesiology/DNB Anesthesiology  | permitted/approved/recognized medical college/institution with one  |
| 7          | Emergency<br>Medicine  | M.D. (Medicine)/M.D. (General Medicine)/ M.S. Surgery/ M.S. General Surgery/M.D. Respiratory Medicine/ M.D. Anesthesiology/M.S. Anesthesiology/ M.S. Orthopedics/DNB(Medicine/General Medicine/Surgery/Respiratory Medicine/ Anesthesiology/ Orthopedics)  With two Years Training in Emergency Medicine | reviews, and case series that are published in journals included in medline, pubmed central, citation index, sciences citation index, expanded embase, scopus, directory of open access journals (DoAJ) will be considered.)  The Author must be amongst first three or should be the corresponding author.   |
| 8          | Pathology              | MD (Pathology)   | (II) Research project in lieu of publication authorship can be  |
| 9          | Microbiology           | MD (Microbiology)  | considered only if the person is principal or co-principal investigator   |
| 10         | Biochemistry           | MD (Biochemistry)  | (P1 /CoPI) of a research project funded by national research body   |
| 11         | Rediology              | MD (Rediology)   | such as Indian Council For Medical research (ICMR), Department of   |
| 12         | ENT                    | MD (ENT)   | Science and Technology (DST), Department of Bio-Technology  |
| 13         | Opthalmology           | MD (Opthalmology)  | (DBT) or any such body. (III) Should have completed the   |
| 14         | Forensic Medicine      | MD (Forensic Medicine)   | Basic course in Medical Education Technology form institution(s) designated by MCI.  (IV) Should have completed the basic course in biomedical research from institution(s) designated by MCI. Further provided that for the transitory period of 2 years w.e.f. the date of this notification the appointment / promotion to the post of Associate Professor can be made by the institution in accordance with "Minimum Qualifications for teachers in Medical Institutions Regulations, 1998" as prevailing before issuance of this notification. |

#### 3. POST - ASSISTANT PROFESSOR :-

| Sr.<br>No. | Subjects                                | Qualification   | Full time teaching Experience as per Council   |
|------------|---|---|--|
| 1          | General Medicine                        | M.D. (Medicine)/M.D. (General<br>Medicine)/DNB(Medicine/General<br>Medicine)  | (I) 3 years Junior Resident in a recognized permitted medical college in the concerned subject |
| 2          | Paediatrics                             | M.D. Pediatrics/DNB Pediatrics  | and one year as Senior Resident in the concerned subject in a                                  |
| 3          | General Surgery                         | M.S. Surgery/ M.S. General<br>Surgery/DNB (Surgery/General<br>Surgery)  | recognized permitted medical college. (II) In case of DNB candidate                            |
| 4          | Orthopaedics                            | M.S. Orthopedics/DNB (Orthopedics)  | equated to MD/MS in terms of clause 4A Schedule-I, in addition to                              |
| 5          | Obst. & Gynaecology                     | M.D. (Obst. & Gynecology)/M.S. (Obst. & Gynecology)/DNB (Obst. &  | 3 years teaching experience in the subject as Resident / Register /                            |
|            | i) Antenatal M. O.                      | Gynecology)/  | Demonstrator /tutor of work experience gained during DNB                                       |
|            | ii) Maternity and Child<br>Welfare M.O. |   | training, one year as Senior Resident in the concerned subject                                 |
| 6          | Anesthesiology                          | M.D. Anesthesiology/M.S. Anesthesiology/DNB Anesthesiology  | in a recognized /permitted medical college.  |
| 7          | Emergency Medicine                      | M.D. (Medicine)/M.D. (General Medicine)/ M.S. Surgery/ M.S. General Surgery/M.D. Respiratory Medicine/ M.D. Anesthesiology/M.S. Anesthesiology/ M.S. Orthopedics/DNB(Medicine/General Medicine/Surgery/Respiratory Medicine/ Anesthesiology/ Orthopedics) With two Years Training in Emergency Medicine |  |
| 8          | Pathology                               | MD (Pathology)  |  |
| 9          | Microbiology                            | MD (Microbiology)   |  |
| 10         | Biochemistry                            | MD (Biochemistry)   |  |
| 11         | Rediology                               | MD (Rediology)  |  |
| 12         | ENT                                     | MD (ENT)  |  |
| 13         | Opthalmology                            | MD (Opthalmology)   |  |
| 14         | Forensic Medicine                       | MD (Forensic Medicine)  |  |

Regarding publication NMC rules to be followed and the above qualification and experience criteria are subject to changes made by NMC, New Delhi from time to time.

#### C) General Notes:

- Apply to The Registrar, at Maharashtra University of Health Sciences Nashik's, Maharashtra Post Graduate Institute of Medical Education & Research, District Hospital Compound, In Front of Anant Kanhere Ground, Trimbak Road, Nashik - 422001 in prescribed format along with attested copies of certificates and experience certificates.
- 2) Horizontal Reservation for woman shall be as per Govt. rules and Persons with Disabilities Reservation as per GR. Dtd. 27/04/2011, 04/08/2011, 28/07/2014 & Medical Education and Drugs Department, Mumbai letter Dtd. 30/06/2015.
  - The vertical reservation allotment shall be as per Government Resolution and circular dated 29/05/2017,25/07/2018,05/12/2018,19/12/2018,07/01/2019,12/02/2019,16/02/2019,18/02/2019, 04/07/2019, 05/03/2020, 21/08/2019, 06/07/2021, 09/09/2021 etc.
- 3) Candidates applying for reserved category post(s) should submit caste certificate & caste validity certificate and also recent non-creamy layer certificate, wherever applicable.
- 4) The benefit of reservation shall be admissible to the backward class / category candidates who are domiciled in the State of Maharashtra only.
- 5) The decision taken by Govt. and MUHS authorities regarding essential qualification and experience shall be applicable, from time to time.
- 6) Qualified candidates of less than 69 years of age will be considered for appointment as per saral provisions. However, candidates between the age 64 to 69 years shall have to submit Physical fitness certificate at the time of joining.
- 7) Candidate shall have to submit MS-CIT Certificate from the Institute recognized by the Government.
- 8) It is mandatory to provide the small family declaration certificate in the prescribed for "Form- A" appended to the application form.
- 9) Pay Scale is as per rules formed by the University from time to time
- 10) Application along-with attested copies of all relevant Certificates must reach to the University on or **before i.e. 21 days from publication.**

#### **General conditions and important instructions for Candidates**

- 1) All Posts created for the appointment at "Maharashtra Post Graduate Institute of Medical Education & Research" by saral prakriya under section 9(2)(e)(i) of the Maharashtra University of Health Sciences, Act 1998 from the University Fund.
- 2) This all posts are clearly for 5 year tenure basis. And likely to be eligible for extension if performance of candidate found good.
- 3) If the candidate appointed on this scheme desires to resign, he/she must submit resignation with a notice of three month in advance. In case, if the candidate fails to give three-month advance notice, three-month salary shall be forfeited by the Institute or will have to deposit three-month salary.
- 4) The selected candidate shall be given salary as per the scale prescribed be the Government of Maharashtra and accepted by the University, from time to time.
- 5) The services shall be governed by the provision of the Maharashtra University of Health Sciences Act, 1998 and the Statutes, Ordinance, Rules and Regulations of the University for the time being in force and as may be made from time to time, the relevant instruction from the Govt., if any, and decisions of the Management Council of the University.
- 6) In-service candidates will be required to produce 'No Objection Certificate' of Dean / Principal / employer from their institute or should apply "through proper channel".
- 7) Scan copy of application should be submitted in the prescribed format along with following document in legible format through e-mail (<a href="mailto:mpgi@muhs.ac.in">mpgi@muhs.ac.in</a>) on or before 21 days of publication.
  - a) Date of Birth / Proof of Age (School Leaving Certificate / S.S.C. Certificate/ Birth Certificate)
  - b) Educational qualification (s) documents
  - c) Experience Certificate, as applicable
  - d) University approval to the appointment Post Graduate teacher recognition.
  - e) Publications
  - f) Caste Certificate and Caste Validity Certificate and domicile certificate if applicable
  - g) Proof of change in name, If applicable
  - h) Self-declaration for self-attestation
  - i) Any other document candidate wants to attach.

- 8) Only one scan copy of application should be submitted for one post by one candidate. If applicant desires to apply for more than one post, separate scan copy of application should be submitted for each post.
- 9) Applications received by the University after last date of submission will be rejected. No correspondence will be entertained by the University in this regard.
- 10)Age and experience of applicants will be determined with reference to the last date of receipt of application notified by the University.
- 11)Incomplete applications, certificates not attached, etc. shall not be considered. No correspondence in this respect will be made.
- 12)Mere fulfilling of requirement as laid down in the advertisement does not qualify a candidate for interview / appointment.
- 13) The University reserves the right to fill or not to fill any of the post(s).
- 14) Waiting List of the candidates will be valid for the period of 06 months from the date of issuance of appointment orders of the concerned posts.
- 15)Information related to recruitment process and interview will be provided to eligible candidate on their E-mail / Mobile phone.
- 16) Applicants who found not eligible will not be informed independently / individually.
- 17)On verification, if it is found that the information submitted by any applicant is false / misleading and / or is based on faulty / forged certificates shall be liable for legal action and the selection / appointment shall be immediately cancelled / discontinued.
- 18) The selected candidate should have to submit undertaking / deed of contract as required by the University.
- 19) Any sort of canvassing directly or indirectly will be treated as disqualification and the application of such candidate shall be rejected at any stage.
- 20)In case any issue in this respect arises, it shall be fully and finally decided by the Hon'ble Vice-Chancellor.
- 21) The University reserves the right to cancel, amend or modify any clause of this advertisement any time during recruitment process.
- 22) Candidates belonging to open category need to pay Demand Draft of Rs.1000/- and candidates belonging to reserve category need to pay Demand Draft of Rs.700/- in the name of Registrar, M.U.H.S., Nashik payable at Nashik.
- 23) The candidates have to appear for interview in person at his / her own cost.

24) All the selections will be made as per the MCI / NMC norms.

Place: Nashik

**Registrar**Maharashtra University of Health Sciences Nashik's, Maharashtra Post Graduate Institute of Medical Date: 10/03/2023

Education & Research

Nashik

#### जाहिरात वर्तमानपत्रात देण्याबाबतचा तक्ता खालील प्रमाणे.

#### Maharashtra University Of Health Sciences, Nashik's Maharashtra Post Graduate Institute Of Medical Education & Research, Dindori Road, Mahasrul, Nashik- 422004

Phone No.: 0253-2997296 E-mail: mpgi@muhs.ac.in

Website: www.mpgimer.edu.in

#### APPLICATION INVITED BY SARAL PRAKRIYA (REGULAR POST)

Applications are invited, in the prescribed format, from the eligible candidates for the following teaching posts in the subjects General Medicine, Paediatrics, General Surgery, Orthopaedics, Anaesthesia, OBGY, Emergency Medicine, Pathology, Microbiology, Biochemestry, Rediology, ENT, Opthalmology, Forensic Medicine

# <u>Professor, Associate Professors, Assistant Professors, Antenatal M. O., Maternity and Child Welfare M.O.</u>

Requisite Qualification, Experience, Other details and prescribed application Format are available on University website: www.muhs.ac.in / www.mpgimer.edu.in

Last date of application is 31/03/2023.

Registrar

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK'S

Maharashtra Post Graduate Institute of Medical Education & Research Center,
Nashik

| Reg | stration No                | o         |           |         |            |              |                |                |            |          |             |          |                                    |      |
|-----|----------------------------|-----------|-----------|---------|------------|--------------|----------------|----------------|------------|----------|-------------|----------|------------------------------------|------|
|     | Office use only)           |           |           |         |            |              |                |                |            |          |             |          |                                    |      |
|     | C                          | ategor(y: |           |         |            | NT1          | NT2            | NT3            | ОВС        | SBC      | EWS         |          | Women                              | PH   |
|     |                            | (         | Candida   | ate mus | st round   | aup app      | ropriate       | Catego         | ory una    | er wnici | n applic    | cation i | s submit                           | tea) |
|     |                            |           |           |         | <u>APP</u> | LICAT        | ION F          | ORM            |            |          |             |          |                                    |      |
|     |                            |           |           | A o     | lvo #4i    | a a mar      | at No          | 01/2           | ດວວ        |          |             |          | nt Passport<br>o duly self<br>sted |      |
|     |                            |           |           | AC      | ivertis    | <u>semer</u> | <u>it ino.</u> | <u>U 1/2</u> ( | <u>023</u> |          |             |          |                                    |      |
| Pos | st applied fo              | or :      |           |         |            |              | _ Dep          | artme          | nt :       |          |             |          |                                    |      |
| 1)  | Name:<br>(In Capital le    | etters)   |           | Surnan  | ne         |              | First N        | ame            |            | Fat      | her's / ŀ   | Husban   | d's Name                           | !    |
|     | Name in D                  | Devnag    | ari :     |         | भाडनाव     |              |                | नाव            |            | वि       | <br>डेलांचे | / पती    | चे नाव                             |      |
| 2)  | Address f                  | or Cor    | respor    | ndence  | 9          | :            |                |                |            |          |             |          |                                    |      |
|     |                            |           |           |         |            |              |                | Pin            | Code       |          |             |          |                                    |      |
|     | Permaner                   | nt Addr   | ess       |         | <b>:</b>   |              |                |                |            |          |             |          |                                    |      |
|     |                            |           |           |         |            |              |                | Pin            | Code       |          |             |          |                                    |      |
| 3)  | Contact T                  | el. Nos   | s. : ST   | D cod   | le         |              | _(Res          | s.)            |            |          | (Of         | f.)      |                                    |      |
|     |                            | E         | -mail I   | D       |            |              |                |                | N          | /lobile  | No          |          |                                    |      |
| 4)  | Date of Bi                 | rth:_     |           |         | ( ir       | n words      | S)             |                |            |          |             |          |                                    |      |
| 5)  | Age as on<br>(Please furni |           |           |         |            |              |                |                |            |          |             |          |                                    |      |
| 6)  | Whether I                  | -         |           |         |            |              | Yes            |                | /          | No       |             |          |                                    |      |
| 7)  | Nationalit                 | y :       |           |         |            |              | 8) Re          | eligion        | ı:         |          |             |          |                                    |      |
| 9)  | Caste:<br>(Please attack   | ch docum  | nentary p | proof.) |            |              | 10) Ca         | tegor          | y:         |          |             |          |                                    |      |
|     |                            |           |           |         |            |              |                |                |            |          |             |          |                                    |      |

| 11)        | Application I  | Fee: Nam       | e of the | e Bank:            |    |                       |                 |                                 |                                     |
|------------|--|----------------|----------|--------------------|----|-----------------------|-----------------|---------------------------------|-------------------------------------|
|            | Rs.:   | D.D. No        | )        |                    |    | Dated                 |                 |                                 |                                     |
| 12) V      | /hether Physi  | cally Han      |          |                    |    | / No [                | (if ye          | es, attach docui                | mentary proof)                      |
| 13)        | Sex : N  | lale           |          | Female             |    |                       |                 |                                 |                                     |
| 14)        | Marital Status: Married / Unmarried (If married attach form 'A') |                |          |                    |    |                       |                 |                                 |                                     |
| 15)        | Educational (Mandatory to at                                     |                |          |                    |    |                       |                 |                                 |                                     |
| Sr.<br>No. | Examination<br>Passed  | Name of Univer |          | Year of<br>Passing |    | Subjects <sup>*</sup> | Taken           | Percentage<br>Marks<br>obtained | of<br>Grade                         |
| 01         |  |                |          |                    |    |                       |                 |                                 |                                     |
| 02         |  |                |          |                    |    |                       |                 |                                 |                                     |
| 03         |  |                |          |                    |    |                       |                 |                                 |                                     |
| 04         |  |                |          |                    |    |                       |                 |                                 |                                     |
| 05         |  |                |          |                    |    |                       |                 |                                 |                                     |
| 06         |  |                |          |                    |    |                       |                 |                                 |                                     |
|            |  |                |          |                    |    |                       | 1 -             |                                 |                                     |
| 16)        | Computer Lit   |                | ·        | etc.) :            | Ye |                       | No _            |                                 |                                     |
| 17)        | Proficiency in   |                |          | \ Notional         | Ye |                       | No              |                                 |                                     |
| 18)        | No. of Public<br>(Please attach li                               |                | y).      |                    |    |                       |                 |                                 |                                     |
| 19)        | Experience :   | ( Please at    |          |                    |    |                       |                 |                                 |                                     |
|            |  |                |          |                    |    | Period                |                 | Pay Band                        | Reason                              |
| Sr.<br>No. | Name of the Ir   | stitution      | Post he  | Fro                | m  | То                    | Total<br>Period | & Grade<br>pay                  | for leaving<br>services<br>(if any) |
| 01         |  |                |          |                    |    |                       |                 |                                 |                                     |
| 02         |  |                |          |                    |    |                       |                 |                                 |                                     |
| 03         |  |                |          |                    |    |                       |                 |                                 |                                     |
| 04         |  |                |          |                    |    |                       |                 |                                 |                                     |
| 05         |  |                |          |                    |    |                       |                 |                                 |                                     |
| 06         |  |                |          |                    |    |                       |                 |                                 |                                     |
|            |  |                |          |                    |    |                       |                 |                                 |                                     |

| 20)            | Any other information, which you would like to provide : _ (Please attach separate sheet if necessary)   |         |   |                   |  |
|----------------|--|---------|---|-------------------|--|
|                | : <u>Declaration</u> :   |         |   |                   |  |
| have           | It is hereby declared that above information is correct and vledge and belief and nothing has been concealed / distorted. It is concealed / distorted any material information, my appointmentally terminated without notice / compensation.   | f at ar | y time I                                | an                | n found to                             |
| Place<br>Date  | : (Name & Si   | gnatu   | re of the                               | Ca                | andidate)                              |
| NOTE           | : Incomplete Application will be rejected and no correspond  | ence v  | will be e                               | nte               | ertained                               |
|                | on this behalf.  |         |   |                   |  |
| ====<br>CI     | HECK LIST FOR THE CANDIDATE (TO BE ATTACHED T  |         |   | ==                | =====<br>ATION):                       |
| ====<br>CI     |  |         |   | ==<br>IC          | =====<br>ATION):                       |
|                | HECK LIST FOR THE CANDIDATE (TO BE ATTACHED T  |         |   |                   | ·                                      |
| 1)             | HECK LIST FOR THE CANDIDATE (TO BE ATTACHED T<br>(Candidate should arrenge documents in below sequ   |         | only)                                   | /                 | No                                     |
| <b>1)</b> 2)   | HECK LIST FOR THE CANDIDATE (TO BE ATTACHED T  (Candidate should arrenge documents in below sequents)  Put V as applicable  Application duly completed   |         | only)<br>Yes                            | /                 | No<br>No                               |
| <b>1)</b> 2)   | HECK LIST FOR THE CANDIDATE (TO BE ATTACHED T  (Candidate should arrenge documents in below sequents)  Put  vas applicable  Application duly completed  Self attested Photograph affixed on the Application  |         | Yes<br>Yes                              | /                 | No<br>No                               |
| 1)<br>2)<br>3) | HECK LIST FOR THE CANDIDATE (TO BE ATTACHED T  (Candidate should arrenge documents in below sequents)  Put  vas applicable  Application duly completed  Self attested Photograph affixed on the Application  Application Signed  |         | Yes<br>Yes<br>Yes                       | /                 | No<br>No                               |
| 1)<br>2)<br>3) | HECK LIST FOR THE CANDIDATE (TO BE ATTACHED T  (Candidate should arrenge documents in below sequents)  Put  vas applicable  Application duly completed  Self attested Photograph affixed on the Application  Application Signed  Self-attested copy of each of the following certificate is attached   | ence c  | Yes Yes Yes Yes                         | / / /             | No<br>No<br>No                         |
| 1)<br>2)<br>3) | HECK LIST FOR THE CANDIDATE (TO BE ATTACHED T  (Candidate should arrenge documents in below sequents)  Put  vas applicable  Application duly completed  Self attested Photograph affixed on the Application  Application Signed  Self-attested copy of each of the following certificate is attached a) Date of Birth / Proof of Age   | ence c  | Yes Yes Yes Yes                         | / / /             | No<br>No<br>No                         |
| 1)<br>2)<br>3) | HECK LIST FOR THE CANDIDATE (TO BE ATTACHED T  (Candidate should arrenge documents in below sequents)  Put   | ence c  | Yes Yes Yes Yes Yes Yes                 | / / /             | No<br>No<br>No<br>No                   |
| 1)<br>2)<br>3) | HECK LIST FOR THE CANDIDATE (TO BE ATTACHED T  (Candidate should arrenge documents in below sequents)  Put   | ence c  | Yes Yes Yes Yes Yes Yes Yes Yes Yes     | / / / / / / /     | No<br>No<br>No<br>No<br>No             |
| 1)<br>2)<br>3) | HECK LIST FOR THE CANDIDATE (TO BE ATTACHED T  (Candidate should arrenge documents in below sequence of the sequence of the Application duly completed  Application duly completed  Self attested Photograph affixed on the Application  Application Signed  Self-attested copy of each of the following certificate is attached a) Date of Birth / Proof of Age  b) NOC, if applicable  c) Name change, if applicable  d) Educational qualification documents | ence c  | Yes | / / / / / / /     | No<br>No<br>No<br>No<br>No<br>No       |
| 1)<br>2)<br>3) | HECK LIST FOR THE CANDIDATE (TO BE ATTACHED T  (Candidate should arrenge documents in below sequence)  Put   | ence c  | Yes | / / / / / / / / / | No<br>No<br>No<br>No<br>No<br>No<br>No |

|                     | Self – Declaration for Self Attestation                                   |         |
|---------------------|---|---------|
|                     |   |         |
|                     |   |         |
|                     |   |         |
| 1                   | Son / Daughter of Shri  |         |
|                     | aged years Occupation   |         |
|                     | resident of   |         |
|                     | with UID No. (Aadhar No.)   |         |
| hereby declare that | nat the copies attested by me are true copies of original documents. I a  | am well |
| aware of the fact   | that if the copies are found to be false, I shall be liable for prosecuti | ion and |
| punishment under    | Indian Penal Code and / or any other law applicable thereto.              |         |
|                     |   |         |
| Place :             | Applican't Signature :  |         |
| Date :              | Applicant's Name :  |         |

## **Declaration**

FORM "A"

(See Rule - 04)

|     | I Shri / Smt Son / Daughter/ Husband / Wife of Shri. aged   |
|-----|---|
| 1.  | That I have filled my application for the post of   |
| 2.  | I have (Number) living children as on today, out of which no of children born after 28 <sup>th</sup> March, 2005 is/are(Mention dates of Birth, if any).                                  |
| 3.  | I am aware that if any total numbers of living children are more than two, due to the children born after 28 <sup>th</sup> March, 2006, I am liable to be disqualified for the same post. |
| Pla | ace :   |
| Da  | ste : Signature of Applicant  |