

# BHOPAL MEMORIAL HOSPITAL AND RESEARCH CENTRE

Raisen Bypass Road, Karond, Bhopal – 462 038  
(A 350-Bed Super- Specialty Hospital, Under Department of Indian Council of Medical  
Research(ICMR), Department of Health Research (MoH&FW), Govt. of India)

## **V A C A N C I E S** **FACULTY ( MEDICAL )**

**Advertisement No. 11/2014**

**Last date of Application: 10<sup>th</sup> September 2014**

○ **Professor (08 )**

Cardiology, Cardiothoracic & Vascular Surgery (CTVS), Medical Gastroenterology, Nephrology, Neurology, Pulmonary Medicine, Surgical Gastroenterology & Urology. **(01 in each specialty) .**

○ **Associate Professor (03)**

Medical Gastroenterology, Surgical Gastroenterology & Urology. **( 01 in each specialty) .**

○ **Assistant Professor (02)**

Endocrinology & Nephrology **(01 in each specialty).**

Application Form (hard copy only ) should be accompanied by copies of necessary documents (duly attested by a Gazetted Officer) and should be submitted in person or by post to the office of the Director, BMHRC, Bhopal on above mentioned address latest by [10.09.2014](#), along with non refundable Demand Draft of Rs.500/- for General & OBC candidates and Rs.300/- for SC/ST candidates, drawn in favour of "Bhopal Memorial Hospital & Research Centre" and payable at Bhopal, purchased after the date of advertisement.

The envelope containing the application should be clearly superscribed with name and discipline of the post applied for:-

Director  
BMHRC

**Note : Application Form can be downloaded which is attached herewith**

## BHOPAL MEMORIAL HOSPITAL AND RESEARCH CENTRE, BHOPAL

### ELIGIBILITY CRITERIA FOR MEDICAL

FACULTY	DEPARTMENT	QUALIFICATION & EXPERIENCE
<b>PROFESSOR</b>	Cardiology	DM/DNB in the concerned speciality with 12 years research OR teaching OR clinical experience *.
	Cardiothoracic & Vascular Surgery (CTVS)	MCh/DNB in the concerned speciality with 12 years research OR teaching OR clinical experience *.
	Medical Gastroenterology	DM/DNB in the concerned speciality with 12 years research OR teaching OR clinical experience *.
	Nephrology	DM/DNB in the concerned speciality with 12 years research OR teaching OR clinical experience *.
	Neurology	DM/DNB in the concerned speciality with 12 years research OR teaching OR clinical experience *.
	Pulmonary Medicine	DM in the concerned speciality with 12 years OR MD/DNB in the concerned speciality with 14 years research OR teaching OR clinical experience *.
	Surgical Gastroenterology	MCh/DNB in the concerned speciality with 12 years experience or MS(Surgery) with 14 years research OR teaching OR clinical experience* out of which 2 years Special Training in Surgical Gastroenterology.
	Urology	MCh/DNB in the concerned speciality with 12 years research OR teaching OR clinical experience *.
<b>ASSOCIATE PROFESSOR</b>	Medical Gastroenterology	DM/DNB in the concerned speciality with 08 years research OR teaching OR clinical experience *.
	Surgical Gastroenterology	MCh/DNB in the concerned speciality with 08 years experience OR MS(Surgery) with 10 years research OR teaching OR clinical experience* out of which 2 years Special Training in Surgical Gastroenterology.
	Urology	MCh/DNB in the concerned speciality with 08 years research OR teaching OR clinical experience *.
<b>ASSISTANT PROFESSOR</b>	Endocrinology	DM/DNB in the concerned speciality (Experience not essential).
	Nephrology	DM / DNB in the concerned speciality (Experience not essential).

#### Important Note:

- If no suitable candidate is found at Professor / Associate Professor level, the post can be filled up at one level below i.e. Associate Professor/ Assistant Professor.**

2. All Medical Qualifications should be recognized by Medical Council of India as well as Registered with MCI / State Medical Council.
3. Experience wherever prescribed means experience gained **AFTER** acquiring the prescribed essential qualification.
4. **\*CLINICAL EXPERIENCE** means experience in a Medical Institution.

**Other Service Conditions:-**

**1. Pay Scale :**

**Professor** : PB-4 Rs.37400-67000+ GP Rs 8700

**Associate Professor** : PB-3 Rs.15600-39100+ GP Rs 7600

**Assistant Professor** : PB-3 Rs. 15600-39100+ GP Rs 6600

2. Allowances as per Central Government Rules are admissible on the above pay scale.
3. Benefits of new restructured defined contributory Pension system are admissible as per the provision contained in the Ministry of Finance, Department of Economics Affairs (ECB & PR Division), Notification No.5/7/2003-ECB & PR dated 22.12.2003 effected from 1.1.2004.
4. Private practice is not allowed. However, non-practice allowance is admissible to medical graduates only as per rules.

**NOTE :-** Employees working in BMHRC are not permitted to engage in private practice or any other form of work/employment outside the BMHRC either on honorary basis or otherwise, during or outside the working hours.

**Upper Age Limit :**

Professor : 50 years

Associate Professor : 45 years

Assistant Professor : 40 years

( Relaxable up to 5 years for Government Servants & SC/ST and 3 years for OBC candidates (not belonging to creamy layer) in accordance with the instructions issued by the Department of Personnel and Training from time to time in this regard. The Upper age limit shall be determined as on closing date of application (**i.e. 10.09.2014**)

- The Competent Authority reserves the right to make any amendment, cancellation and changes in this advertisement in whole or in part without assigning any reason.
- The candidates are advised to ensure that they fulfill the eligibility criteria as mentioned in the advertisement before applying for the posts.
- Vacancies may increase or decrease at the time of interview by the orders of the competent authority. The vacancies indicated as above are provisional and includes anticipated vacancies. This is subject to change without any notice.
- Crucial date for determination of eligibility with regards to Educational Qualification and Experience will be the **closing date of application i.e. 10.09.2014.**
- Candidates are advised in their own interest to apply much before the closing date and should not wait till the last date.
- In case the last date of receipt of application is declared holiday, the last date for receipt of the application will be considered as next working day.
- Incomplete applications in any respect will not be considered. All previous applications received in this hospital are treated as cancelled and only application in response to this advertisement on prescribed pro forma attached herewith will be considered.
- Applications received late, unsigned and or without fee will not be entertained. The Hospital will not be responsible for late receipt of application due to postal delay.
- It is not obligatory on the part of the Hospital to call for interview every candidate who possess the essential qualifications. The competent authority reserves the right to shortlist candidates on the basis of higher qualification/years of experience in the subject. The decision of the Director General, ICMR will be final in this regard.
- The interview call letters, if short listed, shall be sent by speed/ registered post. However, the Hospital shall not be responsible for any postal delay/lapse, whatsoever.
- Any canvassing by or on behalf of candidates or to bring political or other outside influence with regard to selection / recruitment will lead to disqualification.
- Candidates serving in Govt./ Autonomous bodies should apply Through Proper Channel and should submit a 'No Objection' certificate from their employer at the time of interview. In case they do not furnish the same for some reasons or other, their candidature will straight away be rejected.

- Other service conditions will be applicable as per service condition prescribed from time to time by the ICMR.
- No correspondence or personal inquiries shall be entertained.
- The appointment to the said post will be subject to physical fitness from the competent medical board for which he will be sent to designated medical authority by the Institution before joining the post.

**IMPORTANT**

Applicants should indicate the name & discipline of the post applied for legibly on the envelope and first page of prescribed “APPLICATION FORM”.

**JURISDICTION OF ANY DISPUTE:-** In case of any legal dispute the jurisdiction of the court will be Bhopal.

Application Form can be downloaded which is attached herewith.

Application Form ( hard copy only ) should be accompanied by copies of necessary documents ( duly attested by a Gazetted Officer) and should be submitted in person or by post to the office of the Director, BMHRC, Bhopal on above mentioned address **latest by 10.09.2014** along with non refundable Demand Draft of Rs.500/- for General & OBC Candidates and Rs. 300/- for SC/ST candidates, drawn in favour of “Bhopal Memorial Hospital & Research Centre” and payable at Bhopal, purchased after the date of advertisement.

Director ,BMHRC

## APPLICATION FORM

### **BHOPAL MEMORIAL HOSPITAL & RESEARCH CENTRE**

*Indian Council of Medical Research (ICMR), Govt. of India*

( A 350 Bed Super-Specialty Hospital )

Raisen Bypass Road, Karond, Bhopal-462038 (MP)

Advt. No. 11/2014

Affix a  
passport  
size  
photograph

**Application for the Post of :** \_\_\_\_\_

**in the department of** \_\_\_\_\_

Details of Demand Draft	Tick the Applicable Category
DD No <input style="width: 80px;" type="text"/> Dated <input style="width: 80px;" type="text"/>	General <input style="width: 40px;" type="checkbox"/> Scheduled Caste <input style="width: 40px;" type="checkbox"/>
Amount <input style="width: 100px;" type="text"/>	Scheduled Tribe <input style="width: 40px;" type="checkbox"/> Other Backward Class <input style="width: 40px;" type="checkbox"/>
Name of the Bank <input style="width: 180px;" type="text"/>	(Enclose proof of Caste Certificate issued by Competent Authority)

1. Name of the Applicant : \_\_\_\_\_

2. Sex : Male / Female (tick applicable word) Marital Status : Married / Unmarried

3. Father's/Mother's Name : \_\_\_\_\_

4. Spouse Name : \_\_\_\_\_

5. Date of Birth : \_\_\_\_\_

6. **Age as on 10.09.2014:**

Years	Months	Days
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7. Present Address : \_\_\_\_\_

Telephone/ Mobile No. \_\_\_\_\_ e-mail : \_\_\_\_\_

8. Permanent Address : \_\_\_\_\_

Telephone/ Mobile No. \_\_\_\_\_ e-mail : \_\_\_\_\_

9. Nationality : \_\_\_\_\_

**10. Permanent MCI / State Medical Council Registration No. & Place of Registration :**

MBBS : Registration No \_\_\_\_\_ Place \_\_\_\_\_

MD/MS/DNB : Registration No \_\_\_\_\_ Place \_\_\_\_\_

DM/M.Ch/DNB : Registration No \_\_\_\_\_ Place \_\_\_\_\_

**11. Details of Educational Qualifications :**

Name of Examination	Maximum Marks	Marks Obtained	% of Marks	Month/Year of Passing	No. of Attempts	College & University
MBBS						
I Prof.						
II Prof.						
Final (Part-I)						
Final (Part-II)						
Total of all MBBS Exams						
MD/MS/DNB						
DM/MCh/DNB						

12. Thesis / Dissertation Title where applicable : \_\_\_\_\_

13. National/ International conferences/ seminars etc. attended and the title of papers presented, if any. (Use separate sheet if space is inadequate )

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14. Membership of National and International Bodies :-

(a) National:

(b) International:

15. Details of postgraduate work/publications. (Give the list on separate sheets): Published papers should have statement about **indexed, impact factor of journal & citation of paper.** List of publications has to be classified as :

15.1 Publication as First Author and/or Corresponding Author in indexed journals.

15.2 Publication as Co-author indexed journals

15.3 Papers in Books, Proceedings & non indexed journals.

16. Total Research Experience with details in each area :

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17. Major academic/ other achievements :

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18. Awards and Prizes received : (Name of Awards/ Fellowships, year awarded by)

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19. Current Activities :

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20. **Experience** : Experience certificate (to be attached) issued by the competent authority clearly indicating dates (from and to) stating the nature of the job and required details. (Particulars of Employments held should be given in chronological order ) :

Name of the Employer & Address	Post Held	Period		Nature of work performed or being performed	Salary (Excluding allowances) last drawn & Scale of pay
		From	To		

( Use separate sheet if space is inadequate )

21. The following additional information may be provided as per format given below for the post along with your application:

**Extramural Research Funding Received :**

**1. R&D (Govt. Agencies)**

Sl. No.	Title of Project & duration	Funding Agencies Govt. Agencies R&D Projects (ICMR/DST/DBT etc.) and Amount	Level of Participation whether		
			Pl.	Co-Pl	Others

**2. Non R&D ( Sponsored / Commercial ) :**

Sl.No.	Title of Project & duration	Funding Agencies	Level of Participation whether		
			Pl.	Co-Pl	Others

22. Are you being considered for any appointment /scholarship elsewhere ? If so please give details :

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23. If selected, the period required to join the post:\_\_\_\_\_

**24. References:**

(These should be persons resident of India and holders of responsible position. They should be intimately acquainted with the applicant's character and work, but must not be relatives. Where the candidate has been in employment, he/she would either give his/her present or most recent employer or immediate superior as a reference or produce testimonials from him in regard to the candidate's suitability for the post which he/she is an applicant).

SL. No.	Name	Occupation or Position	Address & Contact No.
1			
2			
3			

25. Any other information you wish to add :

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26. Check List: ( Please tick in the box given below **as proof of enclosures**. All Certificates must be attested by a Gazetted Officer and be attached in the following order :

(i) Certificate in support of age ( 10 <sup>th</sup> )	_____→	<input type="checkbox"/>
(ii) Mark Sheets of MBBS (I, II & Final years).	_____→	<input type="checkbox"/>
(iii) Degree of MBBS.	_____→	<input type="checkbox"/>
(iv) MD/MS/DNB	_____→	<input type="checkbox"/>
(v) DM/M.Ch /DNB (Super Speciality).	_____→	<input type="checkbox"/>
(vi) Attempts Certificate (Graduation / Post graduation /Postdoctoral	_____→	<input type="checkbox"/>
(vii) Registration with MCI/State Medical Council (MP)	_____→	<input type="checkbox"/>
(viii) Additional Registration MCI / State Medical Council (MP).	_____→	<input type="checkbox"/>
(ix) SC/ST/OBC certificate in prescribed format of Govt. of India	_____→	<input type="checkbox"/>
(x) Experience Certificate	_____→	<input type="checkbox"/>
(xi) No Objection Certificate(if the candidate is already in Service).	_____→	<input type="checkbox"/>
(xii) Documentary Proof of the information furnished from S.No.12 to 18.	_____→	<input type="checkbox"/>

## **DECLARATION**

1. I hereby declare that the entries in this form and the additional particulars, if any, furnished herewith are true to the best of my knowledge and belief.
2. I have informed my Head of Office/Department in writing that I am applying for this post and shall produce "No Objection" certificate at the time of the Interview.

Place: .....

Date: .....

.....  
(Signature of the applicant )

Full Name : .....

### **Note :**

1. Application received after the closing date for whatever reason is liable to be rejected.
2. If the fact that false information has been furnished or that there has been suppression of any material information in the application form comes to notice at any time during the service of a person, his service would be liable to be terminated.
3. Application not signed by the candidate is liable to be, rejected.
4. The candidates who are employed should submit a **"No Objection" Certificate** from their employer at the time of interview. In case they do not furnish the same for some reasons or other, their candidature will straight away be rejected and they will not be entitled to any claim including T.A. from the council.

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