

राजेन्द्रआयुर्विज्ञानसंस्थान

(झारखण्डसरकारका एक स्वयतशासी संस्थान)

राँची-834009(झारखण्ड)

दुरभाष: 0651-2541533, फ़ैक्स: 0651-2540629,

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RAJENDRA INSTITUTE OF MEDICAL SCIENCES

(An Autonomous Institute under Govt. of Jharkhand)

Ranchi-834009(Jharkhand)

Phone: 0651-2541533, Fax: 0651-2540629,

Email : rimsranchi@rediffmail.com

Advertisement No Dated

WALK IN INTERVIEW

Applications in prescribed format with complete bio-data are invited to fill up the posts of various faculty positions on a contractual basis for 01 year or till the permanent posts are filled whichever is earlier in different Departments of Rajendra Institute of Medical Sciences, Ranchi an autonomous institution under Government of Jharkhand.

| Sl. No | Department | No. of Posts | Regular | | | | | Backlog | | | | | Total |
|--------|------------------|--------------|---------|----|----|-----|-----|---------|----|----|-----|-----|-------|
| | | | UR | ST | SC | BC1 | BC2 | UR | ST | SC | BC1 | BC2 | |
| 1 | Medical Oncology | 03 | 1 | 1 | - | 1 | - | - | - | - | - | - | 03 |

Venue: Office of the Director, RIMS, Ranchi.

Reporting time for walk-in-interview: On 16/11/2021 at 10:30 Onward.

Essential Qualification/ Experience

ASSISTANT PROFESSOR

- A medical qualification included in the level I or II schedule or part II of the third schedule to the Indian medical council Act of 1956 (persons possessing qualification included part II of the third schedule should also fulfill the condition specified in section 13(3) of the Act.
- A postgraduate qualification e.g. MD/MS or a recognized qualification equivalent thereto in the respective discipline /subject.

Experience.

Three years teaching and/or research experience in recognized Institution in the subject of specialty after obtaining the qualifying degree of M.D/M.S or a qualification recognized equivalent thereto.

Essential for Super specialty discipline:

Same as first one

- D.M in the respective discipline /subject for a medical super specialties and M.Ch. in the respective discipline /subject for a surgical super specialties (2 years or 3 years or 5 years recognized course) or a qualification recognized equivalent thereto.

Experience:

One years teaching and/or research experience in recognized Institution in the subject of specialty after obtaining the qualifying degree of D.M/M.Ch (2 years or 5 years recognized course after MBBS) or qualification recognized equivalent thereto. However, no experience is necessary for the candidates possessing 3 years recognized Degree D.M/M.Ch. or a qualification recognized equivalent thereto.

EMOLUMENTS:

- The Appointment is purely contractual basis on consolidated salary of Rs 1,50,000/-per month as per decision of 41th GB Meeting RIMS, Ranchi Dated 21-11-2015.

INSTRUCTIONS FOR THE CANDIDATES

1. The post of Assistant Professor on Contractual basis for 01 year or till the permanent posts are filled, which ever is earlier.
2. Application duly filled in prescribed format and signed by the candidate along with all relevant self attested copy of certificates to be submitted at the time of interview.
3. The candidates are required to produce original of all enclosed documents for verification at the time of interview.
4. Separate application duly filled in prescribed format is to be submitted, if the candidate is applying for more than one post.
5. Self attested photocopies of all certificate(s) such as all mark sheets (Undergraduate), attempt certificate of MBBS & MD/MS/DNB/Diploma/DM/MCh certificate of registration, postgraduate passing certificate along with oneself attested passport-size-photograph are required to be attached with the application form.
6. Applications not filled in prescribed format will not be considered.
7. Employees of Government or Semi-government institutions must bring No Objection Certificate from the employer at the time of interview.
8. The candidate must be a citizen of India.
9. The post(s) is/are whole time and private practice of any kind will not be allowed.
10. No TA/DA will be given to the candidates for Walk-in-interview.
11. Reservation policy as per Jharkhand Government Rules will be applicable.
12. Canvassing in any form and/or bringing in any influence will be treated as disqualification.
13. Director, RIMS, Ranchi reserves the right to cancel this advertisement without assigning any reason.
14. All disputes are subject matter of Ranchi Jurisdiction.
15. The number of vacancies may be increased or decreased according to the final roster clearance by the competent authority.
16. Advertisement is also available on website www.rimsranchi.org.

MAXIMUM AGE LIMIT : Age per AIIMS Norms(RIMS, Rules 2014 September)

APPLICATION FORMAT

PHOTO

Advertisement No.....
Application for the post and dept. ofat Rajendra Institute of Medical Sciences, Ranchi-09.

1. APPLICANT'S NAME (In block letters) :
2. FATHER'S/HUSBAND'S NAME (In block letters):.....
3. DATE OF BIRTH :.....
4. SEX..... 5. NATIONALITY
6. RELIGION : 7. CATEGORY (Write whether Category out of Gen/ST/SC/BC-I/BC-II).....
8. ADDRESS (Including Pin Code No., Mobile No. & Email)
i. CORRESPONDENCE:
ii. PERMANENT :

9. EDUCATIONAL QUALIFICATIONS (Starting from matriculation) :

| S.No. | Examination (s) passed | Name of College/ Institute | Board/University | Yr. of Passing with marks(%) | No. of attempts |
|-------|------------------------|----------------------------|------------------|------------------------------|-----------------|
| | | | | | |

10. TEACHING/ WORK EXPERIENCES:

| S.No. | Name of College/ Institute | Post held | From | To | Total duration |
|-------|----------------------------|-----------|------|----|----------------|
| | | | | | |

11. NO. OF PAPERS PUBLISHED: NATIONAL ----- INTERNATIONAL -----
12. No. of Oral/Poster papers presented in conference.NATIONAL ----- INTERNATIONAL -----
13. Regn. No.: CENTRAL / STATE MEDICAL COUNCIL (Attached proof)::
14. LIST OF SELF ATTESTED COPIES OF TESTIMONIALS WITH PAGE NO OF ENCLOSURES:
15. DECLARATION:

I,.....S/o, W/o.....do hereby declare that all the statements made in this application are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false or incorrect, I hereby convey my consent for cancellation of my candidature.

Place:
Date: Signature of the Candidate

Sd/-

Director,

Rajendra Institute of Medical Sciences, Ranchi.

Memo.....5021...../RIMS, Ranchi, dated: 27/10/2021

Copy to: Account Officer/ Office Superintendent/ Accountant/ Chief Cashier/ Cashier/ Director Cell/ Receiving Clerk and Notice Board, RIMS, Ranchi for information and needful.

Director,

Rajendra Institute of Medical Sciences, Ranchi

26/10/2021