

1M/2024/0338

10.02.24

POSTGRADUATE INSTITUTE OF MEDICAL EDUCATION AND RESEARCH,  
CHANDIGARH

## DEPARTMENT OF INTERNAL MEDICINE



Dated: 10.02.2024

**WALK-IN-INTERVIEW FOR THE POST OF SENIOR RESIDENTS (ADHOC)**  
**AT PGI, CHANDIGARH**

Applications are invited for a walk in interview for filling-up 07 (seven) vacant post of Senior Resident purely on adhoc basis in the Department of Internal Medicine till 30.06.2024 at PGIMER Chandigarh. The interview will be conducted on 19.02.2024 (Monday) at 10 AM in the office of Head, Department of Internal Medicine, PGI, Chandigarh (Block F, 4<sup>th</sup> Floor, Nehru Hospital). The candidates who fulfill the following eligibility criteria are requested to attend the same along with their 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.

**Essential Qualifications/Eligibility:**

- A Medical qualification included in the first or second schedule or Part-II of the third schedule to the Indian Medical Council Act, 1956 (person possessing qualifications included in the part-II of the third schedule should also fulfill the conditions specified in Section 13 (3) of the Act).
- Must be registered with the Central/State Medical Council.
- A postgraduate qualification of an Indian University or MD (General Medicine) or its equivalent degree recognized as such by the Medical Council of India.

01	Name of the post	Senior Resident
02	No. of posts	07 (seven)
03	Pay scales	As per PGI rules
04	Qualification	As above
05	Age Limit	45 years (relaxable by 5 years for SC/ST candidates, 3 years for OBC candidates) The age relaxation for persons with disability would be 10 years (additional 5 years for SC/ST and 3 years for OBC candidates).

The candidates who have completed 3 years tenure of Senior Residency or have done DM/M.Ch are not eligible for the post of Senior Resident.

*Sanjay Jain*  
(Sanjay Jain) 10.2.24

Copy to:

P.S. to DPGI for information of DPGI  
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

अध्यापक और विभागाध्यक्ष  
Professor & Head  
अभ्यंतर चिकित्सा विज्ञान विभाग  
Deptt. of Internal Medicine  
पी.जी.आई., चंडीगढ़  
P.G.I., Chandigarh



**POSTGRADUATE INSTITUTE OF MEDICAL EDUCATION AND RESEARCH  
CHANDIGARH-160 012 (INDIA)**

Advt. No.

**NOTE:**

**I. TO AVOID ANY MIS-REPRESENTATION OR INTERPRETATION OF FACTS, THE APPLICATION MUST BE SENT, SUPPORTED WITH ATTESTED COPIES OF TESTIMONIALS.**

PASTE HERE SELF  
ATTESTED LATEST  
PHOTOGRAPH

**Post applied for:** \_\_\_\_\_

1. (a) Full Name (BLOCK LETTERS):

-----  
(Surname) (First Name) (Second Name)

(b) Sex: Male/Female (c) Marital Status: Married/Unmarried

2. Father's/Husband's Name: \_\_\_\_\_

3. (a) Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tel. No. \_\_\_\_\_ PIN: \_\_\_\_\_

Fax.No. \_\_\_\_\_ Mobile No. \_\_\_\_\_

(b) Permanent Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tel. No. \_\_\_\_\_ PIN: \_\_\_\_\_

Fax.No. \_\_\_\_\_ Mobile No. \_\_\_\_\_

4. (a) Date of Birth: ( ) ( ) ( )  
-----  
(Date) (Month) (Year)

(b) Age: ( ) ( ) ( )  
-----  
(Yrs.) (Months) (Days)

(c) Sex: (Male/Female)

5. Whether belongs to:  Gen.  S.C.  S.T.  O.B.C.  P.H.

(Please strike out which is not applicable) (Attach attested copy of certificate on the proforma prescribed by the Govt. of India)

6. State of Domicile: \_\_\_\_\_

7. Nationality: \_\_\_\_\_ Religion : \_\_\_\_\_

8. (a) Registration No. with the Medical Council: \_\_\_\_\_

(b) State in which registered: \_\_\_\_\_



**(b) After obtaining Postgraduate Qualification:**

Post held (Indicate temporary/ permanent)	Period		Total Period			Pay Scale	Employer's Address
	From	To	Yrs.	mths.	days		

- 11. Details of Prizes, Medals, Scholarships & National/ International Awards etc.
- 12. Additional qualification such as membership of scientific society etc.

- 13. Research experience, if any, together with details of published works in indexed journals.

				NUMBER OF PAPERS		
Published		Accepted for publication	Presented at conference			
Indexed	Non Indexed					
NATIONAL						
INTER-NATIONAL						

- 14. Chapter in books/books edited : \_\_\_\_\_
- 15. (a) Present employment/ post held if any : \_\_\_\_\_
- (b) Pay Scale : \_\_\_\_\_
- (c) Total emoluments drawn : \_\_\_\_\_
- (d) Address of present employer : \_\_\_\_\_
- : \_\_\_\_\_
- 16. If selected, what notice would you require before joining : \_\_\_\_\_
- 17. Have you been outside India for Academic Purpose? If so, give following information : \_\_\_\_\_

Country visited	Dates of visit		Duration of visit			Purpose of visit
	From	To	Yrs.	Mths.	days	

18. Self-evaluation of your work, particularly its strengths in different fields of activity including patient-care, teaching research and administrative, related to the job, which, in your view, entitles you to the post applied for may be given in **Annexure- I**.
19. I attach attested copies of certificates/ degrees in support of age, category, qualification and experience etc. as per list enclosed **Annexure-II**.

Date:  
Place:

Signature of the candidate

**DECLARATION BY THE CANDIDATE**

Post applied for \_\_\_\_\_ at PGIMER INTERNAL MEDICINE

I hereby declare that the above information is true, complete and correct to the best of my knowledge and belief. I have not suppressed any material, fact or factual information. I understand that my candidature is liable to be rejected in the event of any mis- statement/discrepancy in the particulars being detected and after my appointment in such an event, my services are liable to be terminated without any notice to me or reasons thereof. I am not aware of any circumstance which might impair my fitness for employment under the Government.

Date:  
Place:

Signature of the candidate

**\*DECLARATION TO BE SIGNED BY OBC CANDIDATES ONLY**

I \_\_\_\_\_ son/daughter/wife of \_\_\_\_\_  
resident of Village/Town/City/District \_\_\_\_\_  
State \_\_\_\_\_ Community \_\_\_\_\_ **(certificate enclosed)** hereby  
declare that I belong to the \_\_\_\_\_ community which is recognized  
as a backward class by the Govt. of India for the purpose of reservation in services as per orders  
contained in Department of Personnel and Training Office Memorandum No.36012/22/93-Estt(SCT)  
dated 8.9.1993. It is also declared that I do not belong to the persons/sections (creamy layer)  
mentioned in Column 3 of OM No. 36012/22/93-Estt(SCT) dated 08.09.1993 and modified vide Govt.  
of India, Department of Personnel and Training OM No.36033/3/2004-Estt(Res) dated 09.03.2004.

Place:  
Date:

**(Signature of applicant)**  
(in running handwriting)

**\*Note:** The closing date for receipt of application will be treated as the date of reckoning for OBC status of the candidate and also, for assuming that the candidate does not fall in the creamy layer.