

FOR PUBLICATION NEWS PAPER

**NORTHERN RAILWAY
OFFICE OF THE MEDICAL DIRECTOR, NORTHERN RAILWAY CENTRAL HOSPITAL,
BASANT LANE, NEW DELHI-110055**

File No: E/Med/SR/74/CH/18

Advt .No.NRCH/SR/2018/001

ENGAGEMENT OF SENIOR RESIDENTS-CORRIGENDUM

In continuation to Advertisement Number 2973/2018 published on 04.11.2018, please check the corrected format of advertisement posted on 05.11.2018 on website link www.nr.indianrailways.gov.in under head News & Recruitment info/recruitment info.

**MEDICAL DIRECTOR
NORTHERN RAILWAY CENTRAL HOSPITAL,
BASANT LANE, NEW DELHI-110055**

समाचार पत्रों में विज्ञापन हेतु
उत्तर रेलवे
चिकित्सा निदेशक का कार्यालय, केंद्रीय चिकित्सालय, उत्तर रेलवे, बंसत लेन, नई दिल्ली- 110055

फाईल सं० ई/मेड/एस आर/74/के०चि०/18
आर/2018/001

विज्ञापन सं० एन आर सी एच/एस

सिनियर रेजीडेंट को आबंध करना-शुद्धिपत्र

04.11.2018 को प्रकाशित समाचार पत्र में विज्ञापनसंख्या 2 9 73/2018 की निरंतरता में, कृपया विज्ञापन का सही प्रारूप लिंक www.nr.indianrailways.gov.in के तहत News & Recruitment info/recruitment info पर 05.11.2018 को पोस्ट किए गए विज्ञापन में देखें।

चिकित्सा निदेशक
उत्तर रेलवे केंद्रीय अस्पताल,
बसन्त लेन, नई दिल्ली -110055

FOR PUBLICATION ON NORTHERN RAILWAY WEB SITE
NOTICE
NORTHERN RAILWAY
OFFICE OF THE MEDICAL DIRECTOR, NORTHERN RAILWAY CENTRAL HOSPITAL,
BASANT LANE, NEW DELHI-110055

File No: E/Med/SR/74/18

Advt.No. NRCH/SR/2018/001

ENGAGEMENT OF SENIOR RESIDENTS

Applications are invited from eligible candidates for engagement to the post of Senior Resident under Senior Residency Scheme at Northern Railway Central Hospital, New Delhi.

The applications should be filled on a A4 Size Paper, in the prescribed format & complete with all the requisite enclosures .

The Date and Time of the Walk in interview is specified against each Specialty. Any request for a change in Dates will not be entertained.

Candidates should report with Application form duly filled in & signed along with attested copy of all the requisite documents in Auditorium ,1st Floor , Academic Block, Northern Railway Central Hospital, New Delhi on the Date of walk in interview date at 8.30 A.M. They must carry with them all the Documents in ORIGINAL & produce the same for verification.

Selection will be through the process of Walk-in Interview basis. After verification of Documents, only those candidates who are found eligible will be allowed to appear for Interview. All documents have to be produced in ORIGINAL at the time of Interviews also .

The vacancy status & the Dates for WALK IN INTERVIEW are as below.-

S.N.	Specialty	VACANCY STATUS	Date & Time of Walk in Interview	PLACE & REPORTING TIME
1.	MEDICINE	UR - 6, OBC - 3, SC - 2, ST - 1	14.11.2018	AUDITORIUM ,CENTRAL HOSPITAL ----8.30 A.M. to 11: 00 A.M.-----
2.	ONCOLOGY	UR - 1		AUDITORIUM ,CENTRAL HOSPITAL ----8.30 A.M. to 11: 00 A.M.-----
3.	RADIOLOGY	UR - 1, OBC - 1,		AUDITORIUM ,CENTRAL HOSPITAL ----8.30 A.M. to 11: 00 A.M.-----
4.	PEDIATRICS	UR- 2, OBC-1,		AUDITORIUM ,CENTRAL HOSPITAL ----8.30 A.M. to 11: 00 A.M.-----
5.	SURGERY	UR -3 , OBC - 2 , SC -1, ST-1	15.11.2018	AUDITORIUM ,CENTRAL HOSPITAL ----8.30 A.M. to 11: 00 A.M.-----
6.	ORTHOPEADICS	UR - 2 , SC - 1		AUDITORIUM ,CENTRAL HOSPITAL ----8.30 A.M. to 11: 00 A.M.-----
7.	ANAESTHESIA	UR - 3, OBC -1 , SC - 1,		AUDITORIUM ,CENTRAL HOSPITAL ----8.30 A.M. to 11: 00 A.M.-----
8.	CASUALTY (Emergency Medicine)	UR - 1		AUDITORIUM ,CENTRAL HOSPITAL ----8.30 A.M. to 11: 00 A.M.-----
9.	MICROBIOLOGY	UR - 1	16.11.2018	AUDITORIUM ,CENTRAL HOSPITAL ----8.30 A.M. to 11: 00 A.M.-----
10.	OPHTHALMOLOGY	UR - 1, OBC - 1 , SC - 1		AUDITORIUM ,CENTRAL HOSPITAL ----8.30 A.M. to 11: 00 A.M.-----
11.	OBST. & GYNAE	UR - 1 , OBC - 1		AUDITORIUM ,CENTRAL HOSPITAL ----8.30 A.M. to 11: 00 A.M.-----
12.	DENTAL**	UR - 1 , OBC - 1,		AUDITORIUM ,CENTRAL HOSPITAL ----8.30 A.M. to 11: 00 A.M.-----
13.	ENT	UR - 1, SC - 1	AUDITORIUM ,CENTRAL HOSPITAL ----8.30 A.M. to 11: 00 A.M.-----	
	TOTAL	UR - 24, OBC - 11 Grand Total =44 SC - 7,ST - 2		

If the Number of candidates are more, then interviews may have to be continued on next date

****Note: - SR(UR) in dental shall fall vacant wef 25.02.2019**

Contd

Eligibility Criteria:-

(a) Educational Qualification:

(i) Post Graduate Degree *recognised by MCI/ DCI* in the Specialty,

(ii) Post Graduate Diploma *recognised by MCI/ DCI* in the Specialty,

(iii) SR-ONCOLOGY:- Candidates should be DM/DNB oncology or MD Medicine/Pediatrics with one year experience in Medical oncology.

(iv) ONLY If candidates with PG Qualification are not available in a particular specialty, those without PG qualification but having at least three years experience after MBBS/ BDS out of which one year of Junior Residency from a Government Hospital or MCI recognized private hospital in the concerned specialty, can be considered for a period of one year only subject to the condition that fresh selection process has to be done by end of one year.

(b) Registration: Candidates must have a valid registration with Medical Council of India (MCI) / Dental Council of India (DCI) / Delhi Medical Council (DMC) / Delhi Dental Council (DDC) / State Medical/ Dental Council. For candidates not having Registration with Delhi Medical Council (DMC)/ Delhi Dental Council (DDC) , they will have to apply to Delhi Medical Council/ Delhi Dental Council (DDC) for registration, before joining. The proof regarding the same will have to be submitted at the time of joining.

(c) Age Limit: Age as on the **Date of Advertisement**

	Regular age Criteria	Age relaxation-In Case of non availability of Candidates who satisfy laid down age
General/UR	37 yr	40 yrs
OBC	40 yr	43 yrs
SC/ST	42 yr	45 yrs

(d) Tenure: Initial appointment will be for One Year only. This would be extendable to a total maximum period of three (03) years in the form of subsequent 2 annual extensions , subject to satisfactory work , conduct & performance.

Termination/ Resignation of appointment can be done on one month notice or pay from either side.

(e) Admissible Emoluments: Pay Band (PB3)- Rs.15,600-39,100/-, Grade Pay Rs. 6,600/- (vide Railway Board Letter No2006/H/2-1/5, dated 30.03.09, and other allowances as admissible for Senior Residency Scheme under Ministry of Railways.

General Instructions:-

1. All the columns in application form must be filled properly as applications with incomplete/incorrect information are liable to be rejected summarily.
2. All the required certificates duly **self attested** must be attached with the application. The candidates must have their Original Certificates, Publications with them at the time of interview for verification by the office staff & to be shown to the Members of Selection Board if they desire so.
3. Please Note that any discrepancy pertaining to the documents may invite cancellation of offer of appointment as well as legal action under the relevant provisions of Indian Penal Code (IPC).
4. Enclosures as mentioned in the application form at Column-F are to be attached with the application
5. SC/ST candidates are required to submit their caste certificate (issued before the date of submission of their applications) issued only by the Authorised Competent Authority of the State Govt/Govt of India.
6. OBC candidates are required to submit their caste certificate (issued before the date of submission of their applications & but within the last ONE year from the date of Walk in Interview) duly mentioning about the Creamy Layer status) issued only by the Authorised Competent Authority of the State Govt according to the Govt of India. They will also have to submit a DECLARATION as per annexure at the time of Joining.
7. No application fee will be charged from ANY Candidate.
8. No TA/DA/ Allowances of any kind will be paid for appearing in the interview
9. List of the selected candidates will be displayed on the notice board. The offer of appointment will also be sent to the selected candidates by E-Mail & by SPEED POST .
10. The selected candidates will have to report for duty within a period of 15 days from the date of issue of the letter of offer. Candidature may be cancelled in case of not reporting within the prescribed time limit.
11. All the selected candidates will have to produce & deposit their original certificates at the time of joining.
12. Any discrepancy may invite cancellation of appointment and legal action as per the rules. **The Decision of the Selection Board will be final.** In case of any legal dispute the jurisdiction of court will be Delhi/New Delhi only.

APPLICATION & SELF DECLARATION FOR POST OF SENIOR RESIDENT IN THE SPECIALITY OF _____

Ref: File No: E/Med/SR/74/18 ,Advt .No.NRCH/SR/2018/001

To,

The Medical Director

Northern Railway Central Hospital, COLOR PHOTOGRAPH, WITH

Basant Lane ,New Delhi NAME & DATE IN FRONT

& SELF ATTESTED

PASTE A RECENT PASSPORT SIZE

A. PERSONAL DETAILS-(ANY SUPPRESSION OF FACTS OR FALSE INFORMATION WILL LEAD TO CANCELLATION OF CANDIDATURE)

1. Name (BLOCK LETTERS) _____

2. D.O.B. _____ 3. Age on Date of Advt (as Yrs, Months & Days) _____

4. Category-(UR/OBC/SC/ST) _____

5. Father's Name _____ MOBILE No. _____

Father's Name & Address _____

Occupation & details of Employment _____

6. Husbands/Wife's Name _____ MOBILE No. _____

Husbands/Wife's & Address _____

Occupation & details of Employment _____

7. APPLICANTS Present Address & Mailing Address (BLOCK LETTERS) _____
PIN CODE _____

9. APPLICANTS Permanent Address (BLOCK LETTERS) _____
PIN CODE - _____

B. Means of Communication with APPLICANT (Please pay attention & fill in correct details):

1. E. Mail Address (in BLOCK LETTERS): _____

2. Mobile Nos: _____ 3. Landline No (with STD Code) _____

C. APPLICANTS IDENTIFICATION DETAILS: (Sr. No. 1 to 3 are essential)

1. PAN CARD No. _____ Date of Issue & validity _____

2. VOTER I/D No. _____ Date of issue & Validity _____
Issuing Authority _____

3. ADHAAR CARD No.: _____ Date of issue & Validity _____
Issuing Authority _____

4. PASSPORT No. _____ Date of issue & Validity _____ Issuing Authority _____
(PI give a declaration if a Passport has not been issued till now)

Signature of Candidate _____
Place _____

Dated : _____

E. REGISTRATION DETAILS

MEDICAL COUNCIL OF INDIA/STATE MEDICAL COUNCIL	DMC/ DDC (proof of having applied for DMC/ DDC Registration is a must before the joining)
MCI / DCI & STATE M.C/ D.C-	DELHI M.C/ DDC
Regn No:	Regn No:
Date:	Date:
REMARKS	REMARKS

F .Details of Certificates :Copies of Documents duly self attested to be submitted with application form (from S.No.1 to 20):

S.No	TYPE OF DOCUMENT SUBMITTED	Whether Submitted (write yes / No)	If NO , Give Reasons there for	Remarks (By the Scrutinizing Official
1.	Date of Birth Certificate			
2.	Degree Certificate of MBBS/ BDS			
3.	Internship Completion Certificate			
4.	MCI/STATE /DCI Registration Certificate.			
5.	DMC/ DDC, Registration Certificate			
6.	Caste Certificate (OBC/SC/ST) issued by the competent authority (as applicable)			
7.	POST GRADUATE DEGREE (MCI/DCI recognized only)			
8.	POST GRADUATE DIPLOMA Certificate (MCI /DCI recognized only)			
9.	LETTER of RECOMMENDATION of Good Character & Conduct from TWO GAZETTED OFFICERs , on their Official Letter Head bearing their Name, Designation , SEAL & Contact Details.			
10.	Experience Certificate			
11.	Conference Certificate			
12.	Publications & Details			
13.	PAN CARD			
14.	VOTER ID,			
15.	ADHAR CARD			
16.	PASSPORT			
17.	Proof of Present Address.			
18.	Proof of Permanent Address.			

F.DECLARATION

- I, Dr. (Mr/Ms.) _____ s/d/o _____ hereby solemnly declare that statements made above by me are correct & true to the best of my knowledge and belief.
- Further, I do undertake that the above statements, if found false at any stage in future, my appointment shall be cancelled by the administration and I shall be liable for punitive / disciplinary action whatever deemed fit.
- I understand that applying for Registration with Delhi Medical Council is an essential requirement before joining . I undertake to apply for DMC/DDC Registration immediately & will submit the same before my joining at Northern Railway , Central Hospital , New Delhi
- The Decision of the Selection Board will be final. In case of any legal dispute the jurisdiction of court will be Delhi/New Delhi only.

Date: ___Month ___ Year _____

Place:

Signature of candidate

(Name: _____)