BANARAS HINDU UNIVERSITY

(Established by Parliament by Notification 225 of 1916)

NOTIFICATION FOR JOB

Applications are invited for the following posts on the prescribed proforma for the Min. of Health & F.W., Govt. of India Sponsored "National Programme for Health Care of Elderly (NPHCE)" at Institute of Medical Sciences, BHU, Varanasi – 221005 under Prof. I. S. Gambhir, Department of General Medicine, Nodal Officer. (Development Scheme No-NPHCE-4191).

- 1. The application form and other details can be obtained from the BHU website: www.bhu.ac.in
- 2. No TA/DA will be paid for attending interview.
- 3. Incomplete application form will not be entertained.
- 4. Application should reach IMS, building on 10th September 2015 with photocopy of all relevant certificates.
- 5. Application should be typed on A4 size paper and each Application should accompany with relevant certificate duly attested, 2 copies of the recent photograph.
- 6. Application can be given in English with Email ID and phone numbers for communication; **no postal communication will be done.**
- 7. Those who are in service should apply through proper channel.
- 8. Candidate with experience of work in the area of the old age health care (Geriatric) or related field will be preferred.
- 9. All things being equal, SC/ST candidates will be preferred as per GOI/BHU guidelines.
- 10. Reservation for specially abled person as per GOI / BHU guidelines.
- 11. Degrees must be from the recognized Institution/University.
- 12. Reservation for reserved category will be done as per University rules as for the project.
- 13. The candidate must bring the Original documents at the time of interview.
- 14. The date of screening test will be informed through e-mail.

Prof. I S Gambhir Dept. of Medicine. Institute of Medical Sciences Banaras Hindu university. Varanasi -221005 (UP)

S.No	Name of the Post	Vacancy	Salary & Wages (consolidated)	
			Per month (Rs.)	
01.	Medical Officer	01*	40,000/- (Fix)	
	Total post	01		

*Posts may be increased in future.

The posts are initially for six months tenure; renewal will be granted as per work satisfaction. The services of applicants can be terminated at one month notice if work or behavior is found unsatisfactory.

Age Limit: As per BHU rules, relaxable in exceptional circumstances.

16. Details of qualification for the post & format of Application forms are as follows:

S.No.	Post	No.	Qualification
01.	Medical Officer	01	 E.Q. – i. MBBS from a MCI recognized Institution. ii. one year Rotatory Internship. D.Q. – Experience of working in Geriatric Medicine Unit. Training in geriatric medicine

NOTE:

1. The qualification in exceptional situation will be relaxed by the Selection Committee/Investigators.

2. Investigator reserves the right to cancel/modify or invite any person as per requirement of the project.

E. Q.: Essential Qualification D. Q.: Desirable Qualification

BANARAS HINDU UNIVERSITY

APPLICATION FORM

NPHCE – Regional Geriatric Centre, IMS, BHU

Post Applied for

Adv. No. NPHCE - 4191/5

1. Name (In Block Letters):	Affix recent Passport size	
2. Present Designation:		Photograph with Signature
3. Date of Birth:	4. Gender (Male/Female):	
5. Father's Name/Husband's Name	:	
6. Mother's Name:		
7. Marital Status:		
8. Nationality:		
9. Indicate, if SC/ST/OBC:		
10. Address for Correspondence (w	vith Pin code):	
Telephone No. (With STD Code):	Mobile	No. :
E-mail: Fax No.		
11. Permanent Address (with Pin c	ode):	
Telephone No. (With STD Code):	Mobile	No. :
E-mail:	Fax No. :	

12. Distinctions/Prizes/Awards/Medals/Honors etc.

13. Whether you are conversant with Computer (Specify) :

14. Academic Qualifications (Matric onwards):

Examination Passed	Board/University	Year of Passing	Percentage of Marks Obtained	Division/Class /Grade/Merit
High School/Matric or Equivalent				
Intermediate/Hr. Sec. /PUC or equivalent				
MBBS/B.Sc. /B. Tech. or Equivalent				
M.D. /M. Sc. /M. Tech. or Equivalent				
Other Examinations, if any				

15. Appointments held or Experience, if any:

Designation & Name of Institution	Date		Salary with Grade	Nature of Duties	Reason for leaving
	Joining	Leaving			

16. Additional Information, if any (please use separate sheet) :

17. Declaration: I declare that:

1. The information's given above are complete and correct; 2. Neither any disciplinary proceeding are pending nor contemplated against me; 3. I have never been dismissed from service nor debarred from holding any future appointment nor convicted for any offense. No criminal case is pending against me.; 4. In case of concealment/ suppression of facts (s), which may be detected at any stage in future, my appointment is liable to be cancelled/terminated, as the case may be, without notice.

Date :

Signature of the Applicant

18. Endorsement by Employer: