



**INSTITUTE OF MEDICAL SCIENCES
BANARAS HINDU UNIVERSITY
VARANASI – 221005**
INFORMATION LEAFLET FOR REGISTRATION TO



D.M./M.Ch. 3 YEARS COURSE - AUGUST 2012 (Sponsored Category)

1. ELIGIBILITY:

D.M. : Medical graduates holding the degree of M.D. (Medicine) or M.D. (Paediatrics) or DNB in respective subjects or equivalent degree recognized by the Medical Council of India.

M.Ch. : M.S./DNB (Surgery) or equivalent degree recognized by the Medical Council of India.

For both the above courses the candidates must have passed the MD/MS/DNB Examination before **31st May 2012**.

2. DURATION AND RECOGNITION OF THE COURSE:

- a) Duration of DM/MCh course is 3 years
- b) The degrees of **M.Ch.** (Paediatric Surgery, Plastic Surgery, Neurosurgery, Urology) and **DM** (Endocrinology, Gastroenterology, Nephrology) are recognized by the Medical Council of India. The recognition of other degrees is under process.

3. SUBJECT AND NUMBER OF SEATS:

DM (NEUROLOGY) : 1

M.Ch. (CARDIOTHORACIC SURGERY): 2

M.Ch. (PLASTIC SURGERY): 1

The list of subjects and seats cited above are provisional, and subject to change without assigning any reason their of or any prior notice.

Sponsored Category:

- i) For sponsored category seats, only those candidates who are in permanent service of any Government or statutory body are eligible.
- ii) They must apply with a **sponsorship certificate** on the format given in the application form (duly signed by the Employer with date, designation and seal) that he/she is being sponsored for undergoing the course applied for and that he/she will get leave for the full duration of three years of the course of study, with full pay or half pay, and the assurance that after completion of the course he/she will be taken back in service by the employer concerned.
- iii) The selection of the candidates will be on the index (out of 100) calculated on the basis of their aggregate marks in the MBBS, and PG examination (number of attempts) and merit in interview.

5. AVAILABILITY OF APPLICATION FORMS:

- a) It can be downloaded from BHU Web Site www.bhu.ac.in & www.imsbhu.nic.in
- b) It can also be obtained from the office of the Director, Institute of Medical sciences, BHU, Varanasi on submission of a MICR D/D of Rs. 100/- in favour of the “**Director, Institute of Medical Sciences, BHU**”, payable at Varanasi along with self addressed envelop (25 x 16 cm) by post till 31st August, 2012 and in person till 1st September, 2012.

6. SUBMISSION OF APPLICATION FORMS:

- i) The eligible candidates may apply by filling up the application form enclosed herewith in his/her own clean handwriting and all the entries in the form should be filled by the same writing material.
- ii) A candidate can apply and appear for **one subject only**.
- iii) The application must be accompanied with attested copies of all the mark sheets / certificates / degrees / registration number certificate and other documents (from High School to MD/MS/DNB)
- iv) The completed application form in all respects along with all necessary enclosures should reach the office of Director, IMS – BHU on or before Friday, 7th September, 2012, 5.00 PM. The envelope containing the application should be superscribed "**APPLICATION FOR D.M./M.Ch. COURSE AUGUST 2012**". Applications sent by Fax, E-Mail, Photocopies or any other form will not be entertained. Only the original Application form and form downloaded through BHU website will be accepted.
- v) Duly completed application must be accompanied by a **MICR Demand Draft** drawn on a nationalized bank and payable at Varanasi in favour of **DIRECTOR, IMS, BHU of Rs. 2000/- (Rupees Two Thousand only)**. Demand Draft submitted with this form includes examination fees and **is not refundable** in any case.
- vi) Candidates who are in service of Government/Semi-Government/Statutory Body must apply through proper channel with Sponsorship Certificate from the Employer on the proforma as provided in the application form.
- vii) Incomplete applications in any respect will be summarily rejected and no correspondence in this regard will be entertained. Applications received after the last date will not be entertained on any ground including postal delay.
- viii) All passport size photographs must be self attested, identical, snapped with front profile, showing full head, face, shoulder and with both ears and taken without wearing any Cap/Hat/Sun glasses. Polaroid photos are not accepted. Photograph must be taken on or after 31st December 2011 with a placard indicating the date, and name of candidate.

8. SELECTION:

The candidates will be selected for registration/ admission on the basis of their aggregate of marks and number of attempts in MBBS, MD/MS, and the marks obtained in the **interview to be held on 15.9.2012 in the chamber of the Director, Institute of Medical Sciences, BHU from 9AM onwards.**

9. GENERAL:

- i) The sponsored/deputed applicants will be treated as supernumerary candidates and in case of their selection and registration/admission and joining for the course, they will not get any payment from the Institute/University.
- ii) No private practice of any kind shall be permitted during the entire duration of the DM / MCh course.
- iii) The decision of the Director, Institute of Medical Sciences, B.H.U., shall be final and binding on the candidates in respect of the Admission test.
- iv) The selected candidates will have to appear before the admission committee for counseling and also required to sign a bond on non-judicial stamp paper of Rs. 100/- (to be purchased from Varanasi or

any district of State of Uttar Pradesh) on the format to be supplied by the Directorate before he/she is permitted to join the DM / MCh course.

- v) The admission and continuance of Registration/Residency of the candidate shall be subject to the BHU Act, Statutes, Ordinance, Rules and Regulations and orders as may be applicable from time to time and the aforesaid bond. The registration/ admission may be cancelled without any notice if the supervisor of the Department is not satisfied with the work and/or conduct of the candidate.
 - vi) The decision of the Postgraduate Medical Board / Faculty of Medicine, Institute of Medical Sciences - BHU in all the matters of admission/registration shall be final and binding on the candidate.
 - vii) Mere submission of application and appearing and qualifying in the Admission test will not entitle the candidates to claim admission in any of the above course. The candidates must note that if it is found that he/she is not eligible for the Admission test, the Directorate will not issue the Admit Card and will not take any responsibility in this regard.
 - viii) No TA/DA will be admissible for appearing in the Admission test, and for joining the course.
 - ix) Candidate will have to submit documentary proof at the time of admission / registration that their medical degrees are recognized by MCI.
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VARANASI- 221005**

**APPLICATION FORM (Sponsored Category) FOR
THREE YEAR **D.M./M.Ch** COURSES – AUGUST 2012**

Last date for accepting the application form in Office of Director, IMS, BHU: 7th September 2012

(For Office Use Only)

Course: **D.M. / M.Ch.**

Date of Receipt _____

Subject:

Receipt No. _____

Category : **SPONSORED**

Provisionally allowed / Not allowed

Reasons (if not allowed) :

(To be filled in by the CANDIDATE in his/her own handwriting)

DD No.	Date	Amount Rs.	Issuing Bank
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1. Course applied for : DM MCh

2. Subject :

3. Category : SPONSORED

4. Name of the Candidate
(in BLOCK letters)

5. a) Father's Name :

b) Mother's Name :

6. Date of birth :

7. Address for Communication :

.....

..... E-mail

Mobile No..... Tel. No.....

8. Permanent address :

.....

9. Nationality :

10. Religion :

11. State to which belongs :

12. Caste :

13. Marital Status : Married/Unmarried

If married, name of spouse :

-A-

Paste photograph
self attested

Candidates are advised to read this form and information leaflet carefully before filling up their application form

14. Details of the Examinations passed:

Name of the examination	University / Board	Year	Subjects	Marks obtained / Maximum marks	% of Marks	No. of Attempt
High School/ or equivalent						
I.Sc. or equivalent of +2 level						
1st Prof. MBBS						
2nd Prof. MBBS						
3rd Prof. MBBS						
MD / MS / DNB or equivalent						

NOTE : Please attach attested copies of all the Mark sheets/Certificates/Degrees/Registration number certificate and other documents (from High School to MD / MS / DNB)

15. Details of Internship: FromTo Institution

16. Permanent Registration No. : Date: State:

17. Details of present employment, if any:

Name and full address of the Employer:.....

Post held w.e.f. : Tenure of appointment:

DECLARATION

I declare that I have read the information leaflet and that all the information furnished above by me are true. All the attested/ certified copies of certificates/mark sheets are attached. In case any information furnished by me above is found wrong at any time, my candidature for the examination/selection to the course may be cancelled outright and I may be debarred permanently from the test and disciplinary action may be taken against me. I declare that I am an Indian National and have not taken part in any activity subversive of law and no disciplinary action has been taken against me by the University. I have never been debarred by the University for appearing in examination or for seeking admission to any courses of studies.

Date:

(Signature of the Candidate)

Place:

**CERTIFICATE TO BE GIVEN BY THE CANDIDATE SEEKING ADMISSION
UNDER SPONSORED CATEGORY**

SPONSORSHIP CERTIFICATE*

This is to certify that Dr. is a permanent employee of .
..... holding the post of
since He/She is hereby sponsored for undergoing course
at Institute of Medical Sciences, Banaras Hindu University.

In the event of selection he/she will be sanctioned leave for three years on Full Pay/Half Pay to undergo the
above course. This is also further certified that he/she will be taken back into the services after completing the above
course.

Name of the Employer:.....

Name of the Institute:.....
.....

Signature of the Employer
(SEAL)

Date:.....

*This certificate should be issued / signed only by the EMPLOYER of the candidate, clearly mentioning the salary
payment status during the course, otherwise sponsorship and candidature will not be considered



CHECK LIST

(Please arrange enclosures in the following order)

I) <u>Self attested</u> copies of Certificates	<u>Enclosed</u>	<u>Attested</u>	<u>Encl. No.</u>
1. MD/MS/DNB passing/appearing certificate	Yes/No	Yes/No
2. Permanent medical registration certificate	Yes/No	Yes/No
3. Internship completion certificate	Yes/No	Yes/No
4. MBBS Marks sheets	Yes/No	Yes/No
5. High School or equivalent with Date of Birth certificate	Yes/No	Yes/No
6. I.Sc. or equivalent of + 2 level	Yes/No	Yes/No
7. MBBS passing certificate	Yes/No	Yes/No
8. Character certificate	Yes/No	Yes/No
9. MICR Demand Draft of Rs. 2000/-	Yes/No	
II) 1. Sponsorship certificate from employer (for sponsored category)		Yes / No	
III) THREE <u>self attested</u> photographs affixed at designated space marked A, B, C		Yes/No	

(Signature of the Candidate)

NOTE:

- 1) Self attested copy of Certificates should be arranged in above order and an enclosure number should be given on each and same should be listed above in the appropriate column.
- 2) If any of above answer is NO, the application will be rejected without making any correspondence.