



# ALL INDIA INSTITUTE OF MEDICAL SCIENCES DEOGHAR

(स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार के अधीन राष्ट्रीय महत्व का संस्थान)

(An Institution of National Importance under Ministry of Health & Family Welfare)

भारतसरकार/ Government of India

No: AIIMS/DEO/ACAD. SEC./SR/03

Date: 28.04.2021

AIIMS Deoghar invites applications for appointment to the posts of **Senior Resident (Non-Academic) on adhoc basis for 89 days** through Interview/ written test examination in the department of Anesthesiology and General Medicine of this Institution.

| Sl. No. | Name of the Department | No. of Vacant seats |     |    |    |     | Total |
|---------|------------------------|---------------------|-----|----|----|-----|-------|
|         |                        | UR                  | OBC | SC | ST | EWS |       |
| 1.      | Anesthesiology         | 1                   | 2   | 1  | 0  | 0   | 4     |
| 2.      | General Medicine       | 1                   | 1   | 0  | 0  | 0   | 2     |
| TOTAL   |                        | 2                   | 3   | 1  | 0  | 0   | 6     |

(UR- Unreserved, OBC- Other Backward Classes, SC - Scheduled Caste, ST- Scheduled Tribes, EWS- Economically Weaker Sections)

\* 4% PwD on horizontal basis as per Government Rules

**Note:** Vacancies may increase or decrease at the time of selection. The number of vacancies indicated as above are provisional and subject to change without any notice.

## GENERAL INFORMATION

- UPPER AGE LIMIT** (as on the day of interview) will be **45 years**.
- (i) Relaxable for SC/ST candidates up to a maximum period of five years and in the case of OBC candidates up to a maximum period of three years.  
(ii) In the case of Orthopedic/ Physical Handicapped (OPH) candidates up to a maximum period of 5 years for UR, 8 Years for OBC and 10 years for SC/ST category candidates.
- QUALIFICATION:** A Post graduate degree (MD/MS/DNB), from a recognized University/ Institute.
- APPLICATION FEE**
  - UR & OBC: Rs. 1000/-**
  - No fees required for SC/ST/PWD/Women candidates.**
  - The fee shall be received in the form of **NEFT** deposited in the following account “**All India Institute of Medical Sciences (AIIMS) DEO**” payable at Patna (IFSC Code: **BKID0005793**). No other mode of payment i.e., Cash/Cheque/DD/Postal Order will be entertained.
- Canvassing in any form will disqualify candidate.
- The date for determination of eligibility with regard to age, educational qualification and experience etc. will be the last date of submission of application i.e. 5<sup>th</sup> May 2021.
- Person with disability are required to produce the physically handicapped certificate (with degree of disability) in original issued by the Competent Authority (i.e., Medical Board duly constituted by the Central Govt. or State Govt.) at the time of interview.
- Salary:** Level 11 of Pay Matrix with entry pay of Rs 67,700 per month plus NPA and usual allowances as admissible.



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9. Eligible candidates are requested to report at Administrative Block, Ground floor, AIIMS Deoghar on the date of Interview (which will be notified later in AIIMS Deoghar website) with originals, photocopies of relevant documents and one passport size colour photograph. No TA/DA will be permissible for appearing at the interview.

10. Candidates have to fill the Offline Application Form available in AIIMS Deoghar website and send by E-Mail along with one set of self-attested photocopies of following relevant documents, NEFT Receipt and one passport size colour photograph pasted in the application form and send by E-Mail to Recruitment Cell, AIIMS Deoghar ([recruitment@aiimsdeoghar.edu.in](mailto:recruitment@aiimsdeoghar.edu.in))-

a) Date of Birth and Class X and XII Certificate

b) Aadhar Card

c) Certificate of SC/ST/OBC (Non-Creamy Layer)/OPH from the competent authority if applicable. (Candidate must submit the latest OBC certificate issued on or after 01-4- 2016 by the competent authority of Govt. of India in Format given by DOPT/ Govt. of India or for the appointment to the Central Government Job.)

d) MBBS mark sheets and degree Certificate

e) Attempt Certificates

f) MBBS Internship completion certificate

g) MD/DNB mark sheets and degree certificate

h) Medical Registration Certificate UG and PG from MCI/State Medical Council

i) NOC from the present employer (if employed).

j) Experience certificate of previous institutions (if any)

12. Copies of any other relevant documents (publications, awards, fellowship etc.)

**Note:** The last date of sending of application only by soft copies by E-mail is till **5<sup>th</sup> May 2021 till 5PM.** Candidates are advised not to send hard copies.

11. The appointment is full time basis and private practice of any kind is prohibited.

12. The Interview dates of will be notified in due course through AIIMS Deoghar website [www.aiimsdeoghar.edu.in](http://www.aiimsdeoghar.edu.in)

13. All information pertaining to this advertisement including change in date of interview, notices, result etc. will be displayed on AIIMS Deoghar websites. For any queries or clarification please send an email to ([recruitment@aiimsdeoghar.edu.in](mailto:recruitment@aiimsdeoghar.edu.in)) contact No: (6207579740) between 9:00 AM to 5:00 PM on all working days except on Holidays and from 9:00 AM to 1:00 PM on Saturdays.

**14.** Selected candidates have to **join within 1 week of publication of result** in the Institute Website/ receiving of Appointment Letter.

-S/d

**Registrar**  
**AIIMS Deoghar**



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|                   |  |
|-------------------|--|
| Post applied for- | SENIOR RESIDENT(NON-ACADEMIC) in Department of _____ |
|-------------------|--|

|  |   |  |    |                 |     |     |
|--|---|--|----|-----------------|-----|-----|
| Fee Details:   | D.D. No. _____ Bank name _____ Date _____ |  |    |                 |     |     |
| 1  | Name (in BLOCK letters)                   | Affix Recent Passport Size Photograph duly Self attested |    |                 |     |     |
| 2  | Father's Name                             |  |    |                 |     |     |
| 3  | Date of Birth (in Christian era)          |  |    |                 |     |     |
| (Please attach attested copy of relevant certificate)  |   |  |    |                 |     |     |
| 4  | Permanent Address                         |  |    |                 |     |     |
| 5  | Address for correspondence                |  |    |                 |     |     |
| 6  | Mobile No. / Tele. No.                    |  |    | 7. Citizenship  |     |     |
| 8  | E-mail id                                 |  |    | 9. Gender (M/F) |     |     |
| 10   | Category                                  | UR   | SC | ST              | OBC | OPH |
| (Please tick (✓) the appropriate category and attach attested copy of relevant certificate if seeking Reservation) |   |  |    |                 |     |     |

|         |                           |                   |                 |                        |
|---------|---------------------------|-------------------|-----------------|------------------------|
| 11      | Educational Qualification |                   |                 |                        |
| Sl. No. | Exam Passed               | Name of Institute | Year of Passing | Grade/Marks Percentage |
| 1       | 10 <sup>th</sup>          |                   |                 |                        |
| 2       | 12 <sup>th</sup>          |                   |                 |                        |
| 3       |                           |                   |                 |                        |

\*Attach separate sheet if required along with attested copies of relevant documents.

|         |                            |                    |                   |                    |                        |                                 |               |
|---------|----------------------------|--------------------|-------------------|--------------------|------------------------|---------------------------------|---------------|
| 12      | Professional Qualification |                    |                   |                    |                        |                                 |               |
| Sl. No. | Professional Education     | Year of Final exam | Name of Institute | Name of University | Medals & awards if any | Total percentage obtained/ Pass | No of Attempt |
| 1       |                            |                    |                   |                    |                        |                                 |               |
| 2       |                            |                    |                   |                    |                        |                                 |               |
| 3       |                            |                    |                   |                    |                        |                                 |               |

\* Attempt certificate to be submitted. Attach attested copies of relevant documents.



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आरोग्यम् परम् सुखम्

| 13 | Experience Certificate |                   |         |         |
|----|------------------------|-------------------|---------|---------|
|    | Experience as          | Name of Institute | From to | Remarks |
| 1  |                        |                   |         |         |
| 2  |                        |                   |         |         |
| 3  |                        |                   |         |         |

**\*Attach attested copies of relevant documents.**

**Declaration**

I Dr..... S/o/ D/o ..... do hereby declare and affirm that all the statements made in this application are true, complete and correct to the best of my knowledge and belief and nothing has been concealed thereon. In the event of any information being found false or incorrect or ineligibility detected at any point of time, my candidature shall be liable to be rejected without any notice.

I further declare that I fulfill all the conditions of eligibility regarding age limit, educational qualification and experience etc. prescribed for the post.

I am not employed in any other Government Institution/ Autonomous body.

**OR**

I am employed with ..... Government Institution/Autonomous body and if selected, I shall join duty only after acceptance of my resignation from my current employer.

**Date:-**

**Signature of Candidate**

**Enclosures: -**

| Checklist of Certificates   |  |
|---|--|
| 1. Date of Birth and Class X and XII Certificate                                  |  |
| 2. MBBS mark sheets   |  |
| 3. MBBS Degree  |  |
| 4. MD/DNB mark sheets   |  |
| 5. MD/DNB Degree  |  |
| 6. Internship completion certificate  |  |
| 7. Attempt certificates   |  |
| 8. Experience Certificate   |  |
| 9. MCI/ SMC registration  |  |
| 10. No objection certificate from present employer (if applicable)                |  |
| 11. SC/ST/OBC/PH certificate issued by the competent authority (if applicable)    |  |
| 12. Copies of any other relevant documents (publications, awards, fellowship etc) |  |