कार्यालय प्रधानाचार्य स्वशासी राज्य चिकित्सा महाविद्यालय, गोण्डा।

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पत्रांकः 1010 / ए.एस.एम.सी. / स्था० / विज्ञप्ति–2 / 2023,

दिनांकः 03, नवम्बर, 2023.

-:विज्ञप्ति:-

स्वशासी राज्य चिकित्सा महाविद्यालय, गोण्डा के आचार्य, सह–आचार्य एवं सहायक आचार्य के नियमित पदों हेतु निर्धारित प्रपत्र में आवेदन पत्र आमंत्रित किये जाते हैं। पदों की संख्या निम्नवत है:-

큙0	आचार		ार्य	सह अ	चार्य	सहायक ३	भाचार्य
क्रं0 सं0	विशिष्टता	पदों की संख्या	श्रेणी	पदों की संख्या	श्रेणी	पदों की संख्या	श्रेणी
01	आर्थोपेडिक्स			01	SC	*	
02	आप्थलमोलॉजी					01	SC
03	आब्सट्रेटिक्स एण्ड गायनीकोलॉजी	01	SC	01	UR	01	ОВС
04	इमिनोहिमैटोलोजी एण्ड ब्लड ट्रांसफ्यूजन (ब्लड बैंक)					01	UR
05	इमरजेन्सी मेडिसिन	01	UR	01	OBC	01	SC
-06	एनाटामी	01	OBC			01	ОВС
07	एनेस्थीसियोलॉजी	01	UR	01	SC	01	ОВС
08	कम्युनिटी मेडिसिन					01	SC
09	जनरल मेडिसिन	01	SC	01 01	UR OBC	01	UR
10	जनरल सर्जरी	01	UR	01	UR	01	SC
		01,		01	OBC	01	OBC
11	ट्यूबरकुलोसिस एण्ड रेस्पिरेटरी मेडिसिन/ पल्मोनरी मेडिसिन			01	EWS		
12	डरमैटोलॉजी, वेनेरोलॉजी एवं लैपरोसी	8	<u></u> *	01	SC		
13	पीडियाट्रिक्स			01	ОВС		
14	फार्माकोलॉजी			01	SC	3	
15	फिजियोलॉजी	01	ОВС	01	UR	01	SC
16	बायोकेमेस्ट्री			01	ОВС	01	OBC
17	रेडियो–डायग्नोसिस			01	ОВС	01	SC
18	साइकियाट्री			01	EWS	3	
	कुल योग	0	7	16		13	



Qualifications:-

Post	Academic	Teaching & Research Experience		
	Qualification			
Professor 8	MD/MS/DNB in the	i. Associate Professor in the subject for three year in a		
year post PG	concerned subject	permitted/recognized medical college/institution.		
Experience		ii. Should have at least four Research publications (at least two as Associate Professor) [only original paper, meta-analysis, systematic reviews, and case series that are published in journals indexed in Medline, PubMed, Central Science Citation Index, Science Citation Index, Expanded Embase, Scopus, Directory of Open Access Journals (DoAJ)		
		will be considered].		
		iii. Should have completed the basic course in Medical Education Technology from Institutions designated by		
		NMC.		
		iv. Should have completed the Basic course in Biomedical		
		Research from Institutions designated by NMC.		
Associate	MD/MS/DNB in the	i. Assistant Professor in the subject for four year in a		
Professor 5	concerned subject	permitted/recognized medical college/institution.		
years post PG		ii. Should have at least two Research publications [only		
Experience		original paper, meta-analysis, systematic reviews, and		
		case series that are published in journals included in		
		Medline, PubMed, Central Science Citation Index, Science		
	9 *	Citation Index, Expanded Embase, Scopus, Directory of		
		Open Access Journals (DoAJ) will be considered].		
		iii. Should have completed the basic course in Medical		
		Education Technology from Institutions designated by NMC.		
*		iv. Should have completed the Basic course in Biomedical		
		Research from Institutions designated by NMC		
Assistant	MD/MS/DNB in the	One year as Senior Resident in the concerned subject in a recognized/		
Professor	concerned subject	permitted/ medical college after acquiring MD/MS Degree.		

Note:- All qualifications subject to latest NMC notification.

Qualification for selection for Designated Assistant Professor

- A non-teaching Consultant or Specialist, possessing postgraduate medical degree, working for at least two years in the concerned specialty in a minimum 330 beded non-teaching Government Hospital shall be eligible to be designated as Assistant Professor and be absorbed permanently, if that Hospital is being converted into a Government Medical College for imparting undergraduate medical education. The subsequent promotions to higher teaching designations would be as per these regulations. Provided further that this would only be aone time provision and so absorbed teacher should not be transferred from that Institution for five years. The subsequent appointment of may faculty would be as per these regulations.
- Stand-alone Postgraduate medical institution: Consultants or specialists having the required postgraduate degree and experience of working in the concerned specialty/superspecialty department for a period of not less than 2 years in the institution or hospital, not attached to any medical college, where postgraduate teaching is being imparted as per section 9.3 of the Postgraduate Medical Education Regulations, 2022, shall be eligible to be equated as an Assistant Professor in the department concerned. This has to be confirmed by the affiliating University. The subsequent promotions to higher teaching designations would be sa per these regulations.

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- 1. आयु:—उपर्युक्त पदों के लिये अभ्यर्थी की आयु कैलेण्डर वर्ष की 01 जुलाई किंा न्यूनतम उम्र 26 से कम एवं अधिकतम उम्र 65 वर्ष से अधिक नहीं होनी चाहिये।
- वेतनः—
- (क) आचार्य-एकेडमिक लेवल-14 इन्ट्री पे रू0-1,44,200.00
- (ख) सह आचार्य-एकेडमिक लेवल-13ए1 इन्ट्री पे रू0-1,31,400.00
- (ग) सहायक आचार्य—एकेडिमक लेवल—11 इन्ट्री पे रू0—68,900.00 (राज्य सरकार द्वारा राजकीय मेडिकल कालेजों में आचार्य, सहा आचार्य, सहायक आचार्य, पदनामित सहायक आचार्य को पदत्त वेतन/भत्ते मान्ये होगें।)
- 3. आवदेन शुल्क:-

रूपये 500 / — (रू पाँच सौ मात्र) को आवेदन शुल्क डिमाण्ड ड्राफ्ट के रूप में ''प्रधानाचार्य स्वशासी राज्य चिकित्सा महाविद्यालय, गोण्डा.'' के पक्ष में देय होगा।

- 4. चयन प्रक्रिया में प्रतिभाग करने हेत् किसी भी प्रकार का यात्रा भत्ता इत्यादि देय नहीं होगा।
- 5. पदों की संख्या घट या बढ सकती है।
- 6. इच्छुक अभ्यर्थी निर्धारित प्रपत्र पर पूर्ण रूप से भरे हुये आवेदन (आवेदन प्रपत्र कालेज की वेबसाइट www.asmcgonda.org एवं डी.जी.एम.ई. की वेबसाईट dgme.up.gov.in से भी डाउनलोड कर सकते है।) सभी प्रमाण—पत्रों के साथ दिनांकः 30.11.2023 सांय 05 बजे तक प्रधानाचार्य कार्यालय, स्वशासी राज्य चिकित्सा महाविद्यालय, सर्किट हाउस के सामने, पन्तनगर, गोण्डा, उत्तर प्रदेश, पिनकोड—271001 को लेवल स्पीड पोस्ट/रजिस्टर्ड डाक के माध्यम से उपलब्ध कराया जाना सुनिश्चित करें।
- 7. अन्तिम तिथि एवं समय के पश्चात तथा अपूर्ण आवेदन पत्र स्वीकार नहीं किये जायेंगे।
- 8. आरक्षण राज्य सरकार द्वारा जारी मौजूदा नियमों एवं शासनादेशों के अनुसार देय होगा।

प्रधानाचार्य

स्वशासी राज्य चिकित्सा महाविद्यालय

स्वशासी राज्य चिकित्सा महाविद्यालय

AUTONOMOUS STATE MEDICAL COLLEGE, GONDA

Application Format

Adve	rtise	ment Number and Date		
Post &	& De	partment (For Which the application	is being mad	de)
Note:	- All	information must be completed by the applicant.		
	1-	Name of Applicant		
	2-	Male/Female		-
	3-	Father/Husband's Name (Including Surname)		
	4-	Present Address of Residence (Including PIN code)		
		· · · · · · · · · · · · · · · · · · ·	4	ŕ
		Name of the CityPhone No		
		Mobile NumberEmail ID		
	5.	Permanent address	4	£
*				
		Name of the CityPhone NoPhone No		
		Mobile NumberEmail ID		<u> </u>
	6.	Aadhar card Number		
	7.	Date of birth (enclose the mark sheet of high school examination)		
	8.	Age of application as on 01-07-2023DayMonth		
	9.	Applicant's Marital Status-Married/Unmarried		
	10	. Date of marriage		
S.	11	. Category: Unreserved/Scheduled Caste/Scheduled Tribes/Other	Backward	Classes
		/EWS/Disabled		
	12	. Registration Number and Name of the Medical Council and Date		
		a- MBBS		£.
		b- MD/MS		
		c- MCH/DM		
				<u> </u>
		d- Others		

13-Education Qualifications: (Enclose attested photo copies of certificates and marks sheet)

No.	Name of the Examination	Institution Board/University	Year	Subject	Marks/ Obtained/ Max Marks	MBBS Total Marks /Percentage	Effort (attempts)
1	MBBS						
2	MD/MS						31
3	DM/MCH			,			
4	Others	· · · · · · · · · · · · · · · · · · ·					

14- Educational experience :-

No.	Designation	From	то	Duration	Name of the Institution
. 1	Professor				
2	Associate Professor				To the second se
3	Asstt. Professor				3"
4	S.R./Tutor/Demonstrator				

(Attach experience certificates)

15-Research Publications:-

No.	Designation	Research Publications
1	Professor	
2	Associate Professor	, , ,
3	Asstt. Professor	
4	S.R./Tutor/Demonstrator	

(Attach Photo Copy with proof of indexing)

16-If candidates serving in Government/Quasi Government or Public Sector are advised to submit 'No Objection Certificate' from their employer at the time of interview. Failing which their candidature may not be considered.

17- Lis	t of attached certificates as per che	cklist	
18-Det	ails of Demand Draft-		
a-	DD Number		
b-	Issue Date	g likes pive tur i i i 	
C-	Issuing Bank		
Place			52
Date		Full Name and Signature of the Appli	cant

//Announcenment//

- 1. Certify that the above information given by me is complete and true. In the event of information being false, my application form/appointment letter can be cancelled.
- 2. I certify that I have not been found guilty by any court of any offence of moral decimation nor is there any such case against me in any jurisdiction.

Place		
Date	Full Name and Signature of the Applic	ant

Checklist

Name of	applicant:		
1.	CV with list of publications in Vancouver form	nat	
2.	Demand Draft		
3.	Self-Attested Photograph		
4.	Aadhar Card & Pan Card	a a ragion de	1
5.	Category Certificate (should be of the current OBC&EWS Candidates. Category certificate iss Authorities only will be considered)		
6.	DOB Certificate/High School Certificates		4
7.	UG, PG Degree		
8.	UG, PG Registration		
9.	Experience Certificates		
1	D. Research Publications (with proof of Indexing	g)	
1	1. NOC, if in Government Service	partie of S	
1	Revised Basic Workshop in Medical Education application to the Post of Associate Professor	The second secon	
1	3. Basic Course in Biomedical Research (BCBR) Post of Associate Professor & Professor)	(for application to the	
	Place :	Signature of the applicant	4
	Date:		