SANJAY GANDHI POSTGRADUATE INSTITUTE OF MEDICAL SCIENCES, LUCKNOW REGIONAL CANCER CENTRE, DEPARTMENT OF MEDICAL ONCOLOGY

Short term Appointment for Senior Resident (Hospital Services) through WALK-IN-INTERVIEW ON 23rd August, 2023

Applications are invited for vacant post of Senior Residents (Hospital Services) in the Department of Medical Oncology for a short term appointment for a period of 89 days. The details are as under:

SI. No.	Department	No. of Post	Qualification
01.	Medical Oncology	04	-MD/DNB Medicine or
			-MD/DNB Radiotherapy or
	1 ,		-MD/DNB Pediatrics or
			-DNB Medical Oncology
			-MBBS Degree (for JR position)#
			Degree must be recognized by the M.C.I.

- # will be considered only if post graduate candidates are not available.
- Number of posts may be increased or decreased.
- Maximum age limit 45 years as on date of interview.
- Pay and allowances: Rs.67700 plus allowances as per Institute rules.(for SR)
- Pay and allowances: Rs 56100 plus allowances as per Institute rules.(for JR)
- Candidates who have already completed three years senior residency may not be considered for the appointment. Interested candidates are required to appear for a walk-in-interview 23rd August, 2023 (Wednesday) at 10:00 AM in the Department of Medical Oncology. The candidates must bring following documents for submission.
- 1. A Demand Draft of Rs.200/- in favour of "Director SGPGI Academic Account" payable at S.B.I., SGPGIMS Branch, Lucknow.
- 2. Four passport size photographs.
- 3. Curriculum Vitae.
- 4. Photocopies of all relevant certificate and testimonials.
- 5. Candidate should fill the prescribed form available in the site of Institute before the interview.

Venue: Department of Medical Oncology (A-Block, Ground Floor, Main Hospital).

Date : 23rd August, 2023 at 10:00 AM

PS: No TA / DA will be given for attending the interview.

Me (Dr. Punita Lal)
14 4 23



Sanjay Gandhi Postgraduate Institute of Medical Sciences, Lucknow-226 014

Paste a selfsigned Passport-Size Photograph

APPLICATION FORM
Walk-in interview for Ad-hoc short-term Senior Resident
(Hospital Services) / Medical Physics Resident/

Do not staple

,	4.		Den	nonstrators			
	2 3			r 28		parents B	
n codes	Deta	ils of Bank Draft	e .			Signature of Ca	ndidate
1.	Department/Spe	cialty				0	5
			NI Agenti	the section			
2.	First Name	A PAMIL	Mi	ddle Name		Surname	
A STATE OF		The state of the s	1				3
3.	Father's/Husbar	nd's Name					5
7	Mothers Name	The Cartes and Cartes			- 4	*	4
4.	Date of Birth(DI	D/MM/YY)]/ [[Age as on da application	te of
5.	Gender: Male	/ Female /Tra	insgender	y saven			5
_	1	2000年9月1日		V4 +1			
6.	Martial Status (S	Single=1, Married	=2, Widow=	3, Divorced=4,	Separated=5)	The second desired and second	eres y
	Mailing Address:	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	. 77 .		Phone:	The second secon	true de
el à	3			2 10,7 10,8 10,8 10,8 10,8 10,8 10,8 10,8 10,8	Mobile:		
2	8 8 85				e-mail:	3	Commence of the Commence of th
0 0	Permanent Addres	e lif different from	grana teggio	AND A	Phone:	tox 4x	K of
о. г	ermanent Addres	s (ii airsesent itol	n above)		Phone:	A	× × ×
	A mile and a bear	- w - 3 - 4			Mobile:		and and
	5 p 8				e-mail:		E 500 5000
_	ay!	# p " "	1=4\	F*食品器31. (NS. J	e e		28
9.	Category (SC=1,	ST=2, OBC=3, Ger	1=4)	PERTEUM AND	Tel d		
10.	State of Domici					574 45	A THE N
15	T Deate of Donnie	4	tier soin	w " Maritimet.			5 0
11.	MBBS Registrat	ion number (if ap	plicable)	Date	Name of N	Medical Council	
7	¥.	71 59 69 14 14 W		weeks A.C. Mark	And the second		AC M
	T		5. Practical	And I O I		Per per	5 W 935
12.	Examination	Institution	Subject/	Academic Qual Year		Y	
	Passed	Institution 1	Specialty	TCOI	% Marks/ Division	No. of Attempts	8 %
A.	Matriculation	W. Tale w	1 thems is training		"国际的特殊的"	The state of the s	5 8 8
0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				The state of the s			5 A
В	MBBS 14	1334 23	They be	The second	A STATE OF THE STA	E ARLESSON	3 .

e N to	MD/MS/DNB*	3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	11 E 4	A FE	# 10	10 10 10 10 10 10 10 10 10 10 10 10 10 1		n L. 費	¥	-	MD/MS degre recognition status YES/NO
)	Others (Specify)	to service and	, pr	Bar to A Parks	-9	n **	be we a	o v		н	" y = " u
	K" "	45 11	,	er of Part to	n _{sis} : :						*
13	Employmen	t details .	201	and million	Pot No.		acc.	"	15	Alan	
S,L	Post Held		Insti	tution	11 ja	Unly	ersity		Dura		То
				n".	91	140			From	. H	10
5	1			e alban					_		
	3.4-35	Cont Transact		- PAN		/			1 44	1-/	
t.	1 3	F W	Line	1. 11. 18.	v						
		6.5					100 50				
Po	st Held			Durat	lon	То	-	Rea	ason for l	eaving	garanananan a
N:	Therese and the		y %	_		+10		4	-VIII-	1974	M. Acti
			A . They				×	9		1-70-004	d.
											44
	man or man or the		73.11 F	NAME OF THE PARTY OF	ration of I		ents		n n	2016 - 1919 76	
Na	maria ser	a collemant to		NAME OF THE PARTY OF	ration of I	Depend with		The second secon	of an D	Incon	ne (P.M.)*
Na	merican series series	a collemant to		Decla Age	Relation	Depend with	ents	*	epocid. II I	Incon	ne (P.M.)*
	me	EA.		Decla Age	Relation	Depend with	ents		D D	Incon	ne (P.M.)*
	merican series series	EA.		Decla Age	Relation	Depend with	ents	The second secon	D D D D D D D D D D D D D D D D D D D	Incon	ne (P.M.)*
	me			Decla Age	Relation	Depend with	ents		D D D	Incon	ne (P.M.)*
**	me /ith proof.			Decla Age	Relation applicant	Depend with	Occupation		D D	Programme of the state of the s	Secretary Secret
+w If e	me with proof. employed, get yortificate:	ur applicatio	n for	Decla Age	Relation applicant	with	Occupation stitution as u	nder		e a NO	Objection
+w If e	me vith proof.	ur applicatio	n for	Decla Age warded by	Relation applicant	with	Occupation stitution as u	nder		e a NO	Objection
•w If € cel Ce	with proof. employed, get your ificate: rtifled that under	ur applicatio	n for	Decla Age warded by	Relation applicant	with	Occupation stitution as un	nder		e a NO	Objection In
•w If € cel Ce	with proof. employed, get your ifficate: rtifled that under	ur applicatio	n for	Decla Age warded by	Relation applicant	with	Occupation stitution as un	nder		e a NO	Objection In
*w If e cel Ce	inth proof. employed, get yourtificate: rtified that under	ur applicationsigned has not all statement. Lisolemn	n foro	Age Age warded by	Relation applicant the applicant the applicant the applicant the applicant the applicant fany mate	of the in the app	stitution as undication of Dr. Signature true, comple	nder	eal of Head	e a NO	ObjectionIn titution pest of my
*w If e cel Ce	inth proof. employed, get yortificate: rtified that under	ur applicationsigned has not all statement. Lisolemn	n foro	Age Age warded by	Relation applicant the applicant the applicant the applicant the applicant the applicant fany mate	of the in the app	stitution as undication of Dr. Signature true, comple	nder	eal of Head	e a NO	ObjectionIn titution pest of my
•walf eccent Cec	inth proof. employed, get yourtificate: rtified that under	ur applicationsigned has not all statemers. I, solemnitely cancelles	n foro	Age Age warded by	Relation applicant the applicant the applicant the applicant the applicant the applicant fany mate	of the in the app	stitution as undication of Dr. Signature true, comple	nder	eal of Head	e a NO	ObjectionIn titution pest of my
If e cer Ce Da	with proof. employed, get your tificate: rtified that under ted	ur applications in a signed has not all statements in the solution of the statements in the statement in the statements in the statement in the statem	n for no obj	Age Age warded by ection in irm that	Relation applicant y the head of forwarding Declarathe application and the application of	of the in the app	stitution as undication of Dr. Signature true, comple	nder & Se & Se te an oppress f the	d correct sed by me admitting	e a NO d of Inst	Objection

- Bank draft of Rs 200/- in favor of Director, SGPGIMS, Academic account, payable at Lucknow
- Self certified copy of Matriculation certificate/Age Proof or any authentic age proof certificate. 2.
- MBBS/MD/MS/DNB mark sheet/degree or pass certificate & MCI registration proof. 3.
- Certificate/Proof of MD/MS degree's recognition by MCI to be attached with application from. 4,
- Caste Certificate from competent authority within the last 6 months.