

#### कार्यालय, प्रधानाचार्य, महर्षिदेवरहाबाबास्वशासीराज्य चिकित्सामहाविद्यालय, देवरिया, उ०प्र० 274001 Office, Principal, MaharshiDevarha Baba Autonomous State Medical College, Deoria, UP-274001

Website: - mdbmc.in Tel.No- 05568297433

email: - mdbmc2022@gmail.com

पत्रांक:-मे0का0दे0 / विज्ञप्ति / फैकल्टी / 2022-23

दिनांक 02/12/22

#### विज्ञाप्ति

महर्षि देवरहा बाबा स्वशासी रात्य चिकित्सा महाविद्यालय, देवरिया के आचार्य, सह आचार्य एवं सहायक आचार्य के रिक्त पदों हेतु निर्धारित प्रपत्र में आवेदन पत्र आमंत्रित किये जाते हैं। पदों की संख्या निम्नवत है:—

|         |   | आचार्य         |        | सह-               | –आचार्य          | सहायक आचार्य      |                           |  |
|---------|---|----------------|--------|-------------------|------------------|-------------------|---------------------------|--|
| क्र.सं. | विशिष्टता   | पदों की संख्या | श्रेणी | पदों की<br>संख्या | श्रेणी           | पदों की<br>संख्या | श्रेणी                    |  |
| 01      | आर्थोपैडिक्स  | 01             | OBC    | 02                | 02-SC            | 03                | 02-UR<br>01-OBC           |  |
| 02      | आष्यलमोलॉजी   | 01             | UR     | 01                | UR               |                   |                           |  |
| 03      | आब्सट्रेटिक्स एण्ड गाइनकोलॉजी                             | 01             | SC     | 01                | OBC              | 02                | 02-OBC                    |  |
| 04      | इमरजेन्सी मेडिसिन   |                |        | 01                | OBC              | 03                | 01-EWS<br>01-SC<br>01-UR  |  |
| 05      | एनाटॉमी   |                |        |                   |                  | 01                | SC                        |  |
| 06      | एनेस्थीसियोलॉजी   | 01             | ОВС    | 02                | 01-SC<br>01-UR   | 03                | 01-UR<br>02-OBC           |  |
| 07      | ओटो-राइनो-लैरिंगोलॉजी                                     |                |        | 01                | UR               | 01                | OBC                       |  |
| 08      | कम्युनिटी मेडिसिन   | 01             | EWS    | 02                | 01-SC<br>01-UR   | 02                | 01-SC<br>01-UR            |  |
| 09      | जनरल मेडिसिन  | 01             | OBC    | 02                | 01-OBC<br>01-UR  | 02                | 01-UR<br>01-SC            |  |
| 10      | जनरल सर्जरी   | 01             | UR     | 02                | 01-OBC<br>01-EWS |                   |                           |  |
| 11      | टयूबरकुलोसिस एण्ड रेस्पिरेटरी<br>मेडिसिन/पल्मोनरी मेडिसिन |                |        | 01                | sc               | 02                | 01-UR<br>01-OBC           |  |
| 12      | डमेंटोलॉजी वेनेरोलॉजी एण्ड लेप्रोसी                       |                |        | 01                | UR               | 01                | UR                        |  |
| 13      | र्डन्टिस्ट्री   | 01             | SC     |                   |                  |                   |                           |  |
| 14      | पीडियाद्रिक्स   | 01             | UR     |                   |                  | 03                | 01-OBC<br>01-EWS<br>01-SC |  |
| 15      | पैथालोजी ्  | 01             | OBC    | 01                | OBC              | 02                | 01-UR<br>01-OBC           |  |
| 16      | फार्माकोलॉजी  | 01             | UR     | 01                | SC               | 02                | 01-UR<br>01-SC            |  |
| 17      | फिजियो <b>लाजी</b>  | 01             | SC     |                   |                  | 01                | EWS                       |  |
| 18      | फोरेन्सिक मेडिसिन   | 01             | SC     | 01                | UR               | 04                | 02-UR<br>02-SC            |  |
| 19      | माइक्रोबायोलॉजी   | 01             | UR     |                   |                  | 03                | 01-SC<br>01-EWS<br>01-UR  |  |
| 20      | बायोकेमेस्ट्री  |                |        | 01                | OBC              | 01                | OBC                       |  |
| 21      | रेडियोडायग्नोसिस  | 01             | OBC    | 01                | OBC              | 03                | 01-OBC<br>01-UR<br>01-SC  |  |
| 22      | साइकियाट्री   |                |        | 01                | EWS              | 01                | SC                        |  |
|         | कुल योग   | 15             |        | 22                |                  | 40                |                           |  |

-: Qualifications:-Teaching & Research Exp. Academic **Posts** Qualification Professor in the subject for vears permitted/approved/ recognized medical college/institution with three A post graduate **Professor** Research publications (at least two as Associate Professor) (only qualification original papers, meta-analysis, systematic reviews, and case series that MD/MS/DNB are published in journals included in Medline, Pubmed Central, Citation concerned the index, Sciences Citation index, Expanded Embase, Scopus, Directory of subject and as per Open access journals (DoAJ) will be considered). The author must be these Regulations amongst first three or should be the Corresponding author. (ii) Should have completed the Basic course in Medical Education Technology from Institution(s) designated by MCI. (iii) Should have completed the Basic course in biomedical research from Institution(s) designated by MCI. As per NMC Gazette Dated 17, February, 2020, for the appointment to the post of Professor "Minimum Qualifications for Teachers in Medical Institutions Regulations, 1998" as prevailing before issuance of this notification will also be Considered. (i) As Assistant Professor in the subject for 4 years permitted/approved/recognized medical college/ institution with one A post graduate Associate Research publication (only original papers, meta-analysis, systematic qualification Professor reviews, and case series that are published in journals included in MD/MS/ DNB in Medline, Pubmed Central, Citation index, Sciences Citation index, concerned the Expanded Embase, Scopus, Directory of Open access journals (DoAJ) subject and as per will be considered). The author must be amongst first three or should be these Regulations the Corresponding author. (ii) Research project in lieu of publication/authorship can be considered only if the person is Principal or Co-Principal investigator (P1/CoPI) of a research project funded by a national research body such as Indian Council for Medical Research (ICMR), Department of Science & Technology (DST), Department of BioTechnology (DBT) or any such body. (iii) Should have completed the Basic course in Medical Education Technology from Institution(s) designated by MCI. (iv) Should have completed the Basic course in biomedical research from Institution(s) designated by MCI. As per NMC Gazette Dated 17, February, 2020, for the appointment to the post of Associate Professor "Minimum Qualifications for Teachers in Medical Institutions Regulations, 1998" as prevailing before issuance of this notification will also be Considered. For Candidates with MD/MS, 3 years Junior Resident in a A post graduate Assistant recognized/permitted medical college in the concerned subject and One qualification Professor subject in year as Senior Resident in the concerned MD/MS/DNB recognized/permitted medical college. In case of DNB candidate one concerned the year as Senior Resident in the concerned subject subject and as per recognized/permitted medical college is required after DNB degree these Regulations. being equated to MD/MS in terms of clause 4A of Schedule-I. For No. 13 (Asstt Professor- Dentistry)-(i) Post graduate degree in the subject concerned (M.D.S.) or an equivalent qualification as recognized by appropriate council. (ii) Three years of teaching experience in the Subject in a recognized Medical College/University/Institution as resident/ Registrar/ Demonstrator/Tutor as a postgraduate Student and in addition one year experience as Senior Resident in the concerned subject in a recognized Medical College/ University/Institution.

- 1. आयु:— उपर्युक्त पदो के लिये अभ्यर्थी की आयु कैलेण्डर वर्ष की 01 जुलाई को न्यूनतम उम्र 26 से कम एवं अधिकतम उम्र 62 वर्ष से अधिक नहीं होनी चाहिये।
- 2. वेतनमान:
  - **क**. **आचार्य**-एकेडिमक लेवल-14 इन्ट्री पे रू०- 1,44,200.00
  - **ख. सह आचार्य**-एकेडमिक लेवल-13ए इन्ट्री पे रू0-1,31,400.00
  - ग. सहायक आचार्य-एकेडमिक लेवल-11 इन्ट्री पे रू0-68,900.00

(राज्य सरकार द्वारा राजकीय मेडिकल कालेजों में आचार्य, सह आचार्य एवं सहायक आचार्य को प्रदत्त वेतन/भत्ते मान्य होंगे।)

- 3. आवेदन शुल्क:— रूपये—1000.00 (एक हजार रूपये मात्र ) का आवेदन शुल्क डिमाण्ड ड्राफ्ट के रूप में ''प्रधानाचार्य, महर्षि देवरहा बाबा स्वशासी राज्य चिकित्सा महाविद्यालय, देविरिया'' के पक्ष में देय होगा।
- 4. चयन प्रक्रिया में प्रतिभाग करनें हेत् किसी भी प्रकार का यात्रा भत्ता इत्यादि देय नहीं होगा।
- 5. पदों की संख्या घट या बढ़ सकती है।
- 6. इच्छुक अभ्यर्थी निर्धारित आवेदन प्रपत्र को (वेबसाइट http://mdbmc.in और www.updgme.com) से डाउनलोड करके पूर्ण रूप से भरकर, अपने समस्त प्रमाण पत्रों को सत्यापित करते हुये दिनांक 31.12.2022 को सायं 05:00 बजे तक प्रधानाचार्य, महर्षि देवरहा बाबा स्वशासी राज्य चिकित्सा महाविद्यालय, देवरिया— 274001 में केवल स्पीड पोस्ट/रजिस्टर्ड डाक के माध्यम से उपलब्ध कराया जाना सुनिश्चित करें।
- अन्तिम तिथि एवं समय के पश्चात तथा अपूर्ण आवेदन पत्र स्वीकार नही किये जायेंगे।

# Qualification and pay scale for selected candidates as Designated Professor and Designate Associate Professor:-

- **1. Designate Professor:** "The requisite experience for equating a Consultant or Specialist (After possessing postgraduate medical degree in the subject) working in the concerned specialty in the minimum 300 bedded State Government/Central Government Hospitals as professor shal be more that 18 years with four Research publication in indexed journal as 1<sup>st</sup> Author or corresponding author. Such Consultant or Specialist after joining a medical college shall be called as "Designate Professor" and on completion of three years experience in the capacity of Designate Professor such person shall be designated as "Professor" as per MCI norms.
- **2. Designate Associate Professor:** "The requisite experience for equating a Consultant or specialist (after possessing postgraduate medical degree in the subject) working in the concerned specially in the minimum 300 bedded non teaching District Hospitals owened & manged by State Govt/Central Govt. as Associate professors shall be more than 10 years with Two Research publication in indexed journals as 1st Author or corresponding author. Such Consultant or Specialist after joining a medical college shall be designate as "Associate Professor"
- 3. वेतनमान आदि:- मूल विभाग से प्राप्त देयतायें, वेतन, पेंशन एवं ग्रेच्युटी आदि यथावत देय होंगी।
- **4.** Designate Professor and Designate Associate Professor will be considered on deputation from their parent department.

प्रधानाचार्य, महर्षि देवरहा बाबा स्वशासी राज्य चिकित्सा महाविद्यालय, देवरिया। तद्दिनांकित

पत्रांकः—मे0का0दे0 / फैकल्टी / नियु0 / 2022—23 **/ 1/8** 2 प्रतिलिपिः— निम्नलिखित को सूचनार्थ प्रेषित।

- 01. प्रमुख सचिव, चिकित्सा शिक्षा एवं प्रशिक्षण उ०प्र० शासन लखनऊ।
- 02. महानिदेशक, चिकित्सा शिक्षा एवं प्रशिक्षण उ०प्र० शासन लखनऊ।
- 03. मण्डलायुक्त,गोरखपुर मण्डल, गोरखपुर।
- 04. जिला स्वना विज्ञान अधिकारी, देवरिया को इस आशय से प्रेषित कि नियमानुसार हिन्दी एवं अंग्रेजी दैनिक समाचार पत्रों में विज्ञापित करने के पश्चात बिल सत्यापित कर, अधोहस्ताक्षरी के कार्यालय में प्रेषित करें।
- 05. इंचार्ज, महर्षि देवरहा बाबा स्वशासी राज्य चिकित्सा महाविद्यालय, देवरिया की वेबसाइट को इस आशय के साथ प्रेमित की इस विज्ञप्ति को वेबसाइट पर प्रकाशित करें।
- 06. नोटिस बोर्ड, महर्षि देवरहा बाबा स्वशासी राज्य चिकित्सा महाविद्यालय, देवरिया।

महर्षि देवरहा बाबा स्वशासी राज्य चिकित्सा महाविद्यालय, देवरिया।

# MAHARSHI DEVRAHA BABA AUTONOMOUS STATE MEDICAL COLLEGE, DEORIA, UTTAR PRADESH

## **Application Format**

| Advertisement Number and Date  | ******                         |
|--|--------------------------------|
| Post(The Post for which the application  | is being made)                 |
| Note: - All information must be completed by the applicant.                            |                                |
| 1- Name of Applicant   | Photo                          |
| 2- Male / Female   |                                |
| 3- Father / Husband's Name (including Surname)   | L                              |
| 4- Present Address of Residence (including PIN code)                                   |                                |
|  |                                |
|  | *****************              |
| Name of the City Phone No  | ****************************** |
| Mobile Number Email ID   |                                |
| 5- Permanent address   |                                |
|  | •••••                          |
| Name of the City Mobile No   |                                |
| 6- Aadhar card number (if Any)   |                                |
| 7- Date of birth (enclose the mark sheet of high school examination).                  |                                |
| 8- Age of applicant as on 01-07-2022 Day Month   | Vaor                           |
| 9- Applicant's Marital Status- Married / Unmarried                                     | I Cal.                         |
| 10-Date of marriage-   |                                |
| 11-Category: Unreserved / Scheduled Caste / Scheduled Tribes / Othe Classes / Disabled | r Backward                     |
| (Anach photocopy of certificate issued by competent authority for reserved             | ved category)                  |
| 12-Registration Number and Name of the Medical Council and Date                        | Bory)                          |
| a- MBBS  |                                |
| G MG MG  |                                |
| c- MCH/ DM   |                                |

| 13-Educational | Qualifications: | (Enclose | attested | photo | copies | of | certificates | and | marks |
|----------------|-----------------|----------|----------|-------|--------|----|--------------|-----|-------|
| sheets)        |                 |          |          | •     | •      |    |              |     |       |

| No. | Name of the Examination | Institution / Board / University | Year | Subject | Marks<br>Obtained /<br>Max Marks | MBBS Total Marks / percentage | effort<br>(attempts) |
|-----|-------------------------|----------------------------------|------|---------|----------------------------------|-------------------------------|----------------------|
| 1   | MBBS                    |                                  |      | 1       |                                  |                               |                      |
| 2   | MD/MS                   |                                  |      |         |                                  |                               |                      |
| 3   | DM/MCH                  |                                  |      |         |                                  |                               |                      |

### 14-Educational experience:-

| Designation                 | From   | То   | Duration   | Name of the Institution  |
|-----------------------------|--|--|--|--|
| Professor                   |  |  |  |  |
| Associate Professor         |  |  |  |  |
| Asstt. Professor            |  |  |  |  |
| S.R. / Tutor / Demonstrator |  |  |  |  |
|                             | Professor Associate Professor Asstt. Professor | Professor Associate Professor Asstt. Professor S.R. / Tutor / Demonstrator | Professor Associate Professor Asstt. Professor S.R. / Tutor / Demonstrator | Professor Associate Professor Asstt. Professor S.R. / Tutor / Demonstrator |

(Attach experience certificate)

### 15-Research Publications:-

| No. | Designation                 | Research Publications |
|-----|-----------------------------|-----------------------|
| 1   | Professor                   |                       |
| 2   | Associate Professor         | 5                     |
| 3   | Asstt. Professor            |                       |
| 4   | S.R. / Tutor / Demonstrator |                       |
|     | (Attach Photo Com)          |                       |

(Attach Photo Copy)

| advised to submit No Object         | overnment/ Quasi Government or Public Sector are ction Certificate' from their employer at the time of candidature may not be considered. |
|-------------------------------------|---|
| 17-Demand Draft Detail- Date        | , Amount-   |
| Bank Name                           | , DD No   |
| 18-List of attached certificates as | per checklist   |
| Place                               |   |
| Date                                | Full name and Signature of the Applicant  |

#### // Announcement //

- 1. I 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 offense of moral decimation nor is there any such case against me in any jurisdiction.

| Place |  |
|-------|--|
| Date  | Full Name and Signature of the Applicant |