



DELHI STATE CANCER INSTITUTES

- centres par excellence in the service of humanity

(A group of autonomous institutions under the Govt. of NCT of Delhi)

EAST: DILSHAD GARDEN, DELHI 110095

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WEST: C-2/B, JANAK PURI, NEW DELHI 110058

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Website: www.dsci.nic.in E-mail: director.dsci@nic.in NIN No: 1112313380



File No.DSCI-B013/17/2023-ADMN(DSCI)-

Dated:

NOTICE

Applications are invited for recruitment to the post of Junior Resident doctors on regular basis for a max period of 01 year. The Interview will be conducted on 12.03.2024 at 10.30 A.M. (Reporting Time for interview is 09.30 A.M. to 10.30 A.M.).

POST	No. of Vacancies (on Regular basis)					
	Total	UR	SC	ST	OBC	EWS
Junior Resident (MBBS)	67	30	09	04	18	06

The terms & conditions for appointment of Junior Residents (MBBS) are as follows:-

1. Qualification:- MBBS or Degree equivalent thereto from a recognized University/Institute approved by MCI/NMC.
2. DMC Registration:
 - a) The candidate must be registered with Delhi Medical Council at the time of interview or should have applied for the same.
 - b) The candidates, who have submitted receipt showing that they have applied for DMC registration at the time of interview, should submit valid DMC registration certificate within 45 days of joining otherwise their candidature will be cancelled.
3. Admissible Emoluments: Rs.56,100+NPA+other allowances in Pay Level 10 (Index-1) as admissible under the rules of 7 CPC.
4. Internship: The candidates who have completed internship not more than 3 years before the date of interview.
5. Citizenship: The candidates should be Indian citizen.
6. Age limit: Max age as on date of last date of submission of form:-

Category	UR	SC/ST	OBC	PH	EWS
Age	30 Years	35 Years	33 Years	40 Years	30 Years

Age relaxation for SC/ST/OBC/PH candidates shall be applicable as per instructions of Govt. of India issued time to time.

7. Tenure:

- a). Total period of Junior Residency will be One Year (including any previous experience in a recognized Govt. Institution).
8. The number of posts may vary as per vacancy position.
 9. The applicants are advised to fill up the application form very carefully and bring the all relevant documents on the day of interview. Non-Production of original certificates/documents will render ineligible for the interview.
 10. No TA/DA will be paid to candidates for appearing in the interview.
 11. In case number of application forms received is in high volume applicants may be shortlisted for interview on the basis of marks obtained in final MBBS Exam / FMGE.

OTHER INSTRUCTIONS:-

- A).The all columns of application form must be filled correctly along with payment of prescribed fee of Rs.1100/- in “**Delhi State Cancer Institute**” in r/o UR & OBC Candidates. The SC/ST/EWS candidates are exempted from paying application fee. Application fee will not be refunded in any circumstances. The incomplete applications are liable to be rejected summarily.
- B). The candidates must have their original documents at the time of interview to show the authorities, if asked.

10th passed certificate/DOB	Internship Completion Certificate
Final MBBS Mark sheets/FMGE	MBBS /FMGE Pass certificate
Attempt Certificate	Valid Caste / EWS Certificate, if applicable
MBBS Registration with DMC / Applied For certificate	Identity Proof i.e. Aadhaar Card / Voter Card / Passport etc as applicable.
Photograph	Proof of fee payment
Category Certificate, if applicable	Experience Certificate, if any

- C).Please note that any discrepancy related to documents/information may invite cancellation of candidature and may lead to legal action under relevant provisions of Indian Penal Code.
- D). Appointment will be subject to medical fitness and verification of relevant certificates of Education Qualification/Age/Caste/DMC registration etc.
- E). The result will be displayed on the website of Delhi State Cancer Institute & Health & Family Welfare Department, GNCTD.
- F). **Jurisdiction of disputes:** In case of any legal dispute, the jurisdiction of the Court will be Delhi/New Delhi only.
- G). Only OBC candidates of GNCT of Delhi are eligible for reservation in OBC Category and are required to submit their caste certificate alongwith valid Non Creamy Layer (NCL) certificate issued by the Competent Authority of GNCT of Delhi on or before the last date of application. OBC (outside Delhi) candidates will be treated as Un-Reserved(UR).
- H). SC/ST certificate issued from the Judicial/Revenue-Authorities as per Notice in M.H.A. O.M. No. 42/21/49-NGS dated 28.01.1952 revised by the Deptt. of Pension & A.R Letter No. 36012/6/71-Estt. (SCT) Dated 29.10.77 shall be accepted.
- I). Income & Asset certificate issued from the authorities as per O.M. No. 36039/1/2019-Estt(Res) dated 31.01.2019 issued by DoPT, Ministry of Personnel, Public Grievances & Pensions, Govt. of India shall be accepted.
- J).As per order No.5/1593/2017-Wel/CD/8251 dated 05.05.2017, issued by State Commissioner for Persons with Disabilities, PwD candidates will be eligible for 4% reservation in the concerned category & there will be no application fee for them.

Note 1: All Ad-hoc Junior Residents (presently working in DSCI) should apply for appointment on regular basis, if they wish for continuation of services.

Note 2: Bank Account details for submission of fee:-

Name :- Delhi State Cancer Institute.

Name of the Bank:- State Bank of India.

Account Number:- 30944102428.

Saving A/C

Branch Name / City:- Dilshad Garden, Delhi-110095.

IFS Code / MICR Number:- SBIN0009370 / 110002183.

Director, DSCI

Signed by

Surendra Kumar

Date: 22-02-2024 17:12:24



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FORMAT OF THE APPLICATION FORM

Affix recent
passport
size
photograph
here

1. Post Applied For : _____
2. Details of Demand Draft (DD No./Bank/ Amount) : _____
3. Name of the Applicant (Dr/Mr/Miss/Mrs) : _____
in Block letters
4. Date of Birth : _____
5. Father's/Husband's Name : _____
6. Address (with Pin Code) : _____
_____ Pin Code _____
7. Contact Number (with STD Code) : _____
8. E-mail Address : _____
9. Category to which belong (GEN/SC/ST/OBC/PH/EWS) : _____
(ATTACH PHOTOCOPY OF CERTIFICATE)
10. Academic/Technical/Professional Qualifications
(matriculation onwards- attach photocopies of certificates)

S. No.	Name of Exam	Year of Passing	University/ Board	Div./ Class/ Grade	Subject	(%) of Marks

11. Experience (attach photocopies of certificates in support of experience) :

S. No.	Name of Employer/Org.	Period		Designation	Pay Scale/Pay	Nature of Duties	Reason for leaving
		From	To				

12. Any other Information : _____
13. Registration No (DMC/Others, as applicable) : No. _____ Valid upto _____

I, hereby, declare that the information given in application are true, complete and correct to the best of my knowledge and belief. In the event of any information being found false/incorrect at any stage, my candidature/appointment shall be liable to be rejected.

Date:

Place:

(Signature of Candidate)