कार्यालय प्रधानाचार्य, स्वशासी राज्य चिकित्सा महाविद्यालय,सुलतानपुर उत्तर प्रदेश

ई-मेल: asnmc2023@gmail.com वेबसाइट: www.asnmcsultanpur.in

पत्रांकः ए०एस०एम०सी०/सुलतानपुर/2023/1227

दिनॉक: 04/11/2023

🗕 विज्ञप्ति :–

स्वशासी राज्य चिकित्सा महाविद्यालय, सुलतानपुर में आचार्य, सह आचार्य एवं सहायक आचार्य के विभिन्न विभागों में रिक्त पदों के सापेक्ष नियमित चयन हेतु निर्धारित प्रपत्र पर आवेदन पत्र आमंत्रित किये जाते हैं। इन पदों के सम्बन्ध में विस्तृत जानकारी एवं आवेदन पत्र स्वशासी राज्य चिकित्सा महाविद्यालय, सुलतानपुर की वेबसाइट एवं महानिदेशक चिकित्सा शिक्षा एवं प्रशिक्षण उत्तर प्रदेश शासन की वेबसाइट पर उपलब्ध है:—

		आचार्य		सह आचार्य		सहायक आचार्य	
कं. सं.	विशिष्टता	पदो की संख्या	श्रेणी	पदो की संख्या	श्रेणी	पदो की संख्या	श्रेणी
1	आर्थोपेडिक्स			01	SC		
2	आप्थलमोलॉजी					01	SC
3	आब्सट्रेटिक्स एण्ड गायनीकोलॉजी	01	SC				
4	इमिनोहिमैटोलोजी एण्ड ब्लड ट्रांसफयूजन (ब्लड बैंक)	- <u>-</u>		. 	<u>-</u>	01	UR
5	इमरजेन्सी मेडिसिन	01	UR	01	OBC	01	SC
6	एनाटमी	01	0BC			01	OBC
7	एनेस्थीसियोलॉजी	01	UR	01	SC	01	UR
8	जनरल मेडिसिन	01	SC	01	UR OBC	01	ОВС
9	जनरल सर्जरी	01	UR	01	ОВС	01	ОВС
10	ट्यूबरकुलोसिस एण्ड रेस्पिरेटरी मेडिसिन/पल्मोनरी मेडिसन			01	EWS		<u>.</u>
11	पीडियाट्रिक्स			01	OBC		
12	फार्माकोलॉजी			01	SC		
13	फिजियोलॉजी	01	OBC				
14	फोरेन्सिक मेडिसिन					01	UR
15	बायोकेमिस्ट्री	01	UR	01	OBC	01	OBC
16	रेडियो—डायग्नोसिस			01	OBC	01	SC
	योग :	0	8	11		10	

प्रधानीचार्य, स्वशासी राज्य चिकित्सा महाविद्यालय, सुल्तानपुर।

-: Qualifications:-

Posts	Academic Qualification	Teaching & Research Experience
Professor 8 year post PG experience	MD/MS/DNB in the concerned subject.	 v. Associate Professor in the subject for three years in a permitted/ recognized medical college/ institution. vi. Should have at least four Research publications (at least two as Associate Professor) [only original papers, 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]. vii. Should have completed the basic course in Medical Education Technology from Institutions designated by NMC. viii. Should have completed the Basic course in Biomedical Research from Institutions designated by NMC.
Associate Professor 5 years post PG experience	MD/MS/DNB in the concerned subject.	 iv. As Assistant Professor in the subject for four years in a Permitted /recognized medical college/ institution. v. Should have at least two Research publications [only original papers, meta-analysis, systematic reviews, and case series that are published in journals included in Medline, Pub Med, Central Science Citation Index, Science Citation Index, Expanded Embassy, Scopus, Directory of Open Access Journals (Doan) will be considered]. vi. 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 Professor	MD/MS/DNB in the concerned subject.	 C. One year as Senior Resident in the concerned subject in a recognized/ permitted medical college after acquiring MD/MS Degree. D. Two year's experience minimum 330 bedded Government Hospital after getting MD/MS Degree.

Note: - All qualifications subjected to latest NMC notification.

Qualification for selection of 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 bedded 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 NMC regulations. Provided further that this would only be a one time provision and so absorbed teacher should not be transferred from that Institution for five years. The subsequent promotion of faculty would be as per NMC regulations.

- 1. आयु:— उपर्युक्त पदों के लिये अभ्यर्थी की आयु कैलेण्डर वर्ष की 01 जुलाई को न्यूनतम उम्र 26 से कम एवं अधिकतम उम्र 65 वर्ष से अधिक नहीं होनी चाहिये।
- 2. वेतनमान:-
 - (क) **आचार्य** एकेडमिक लेवल—14 इन्द्री पे रू0—1,44,200.00
 - **(ख) सह आचार्य** एकेडमिक लेवल—13ए इन्द्री पे रू0—1,31,400.00
 - (ग) सहायक आचार्य— एकेडिमक लेवल—11 इन्ट्री पे रू०—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 500 / – (रू पॉच सौ मात्र) का आवेदन शुल्क डिमाण्ड ड्राफ्ट के रूप में ''प्रधानाचार्य, स्वशासी राज्य चिकित्सा महाविद्यालय, सुलतानपुर ' के पक्ष में देय होगा।

- 4. चयन प्रकिया में प्रतिभाग करनें हेतु किसी भी प्रकार का यात्रा भत्ता इत्यादि देय नहीं होगा।
- 5. पदों की संख्या घट या बढ़ सकती है।
- 6. इच्छुक अभ्यर्थी निर्धारित प्रपत्र पर पूर्ण रूप से भरे हुये आवेदन (आवेदन प्रपत्र वेबसाइट www.asnmcsultanpur.in एवं www.dgme.up.gov.in से भी डाउनलोड कर सकते हैं) सभी प्रमाण—पत्रों के साथ दिनॉक 06/12/2023 सायं 05 बजे तक प्रधानाचार्य कार्यालय, स्वशासी राज्य चिकित्सा महाविद्यालय, जिला अस्पताल परिसर सुलतानपुर को केवल स्पीड पोस्ट/रजिस्टर्ड डाक के माध्यम से उपलब्ध कराया जाना सूनिश्चित 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।

प्रधानींचार्य,

स्वशासी राज्य चिकित्सा महाविद्यालय,

सुल्तानपुर।

AUTONOMOUS STATE MEDICAL COLLEGE, SULTANPUR

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	Self Attested Photo
2. Male / Female	
3. Father / Husband's Name (including Surname)	
4. Present Address of Residence (including PIN code)	
Name of the City	
Mobile NumberEmail ID	
5. Permanent address	
Name of the CityPhone No	•••••
Mobile Number	
6. Aadhar card number (if Any)	
7. Date of birth (enclose the mark sheet of high school examination)	
8. Age of applicant as on 01-07-2023 Day Month	Year.
9. Applicant's Marital Status- Married / Unmarried	
10. Date of marriage	
11. Category: Unreserved / Scheduled Caste / Scheduled Tribes / Other /EWS/Disabled	
12. Registration Number and Name of the Medical Council and Date	
d- MBBSe- MD/ MSf- MCH/ DMd- Others	

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13. Educational Q	44.00	en 11.	1 4 - comica o	f certificates an	d marks silects)
12 Educational ()	malifications' (Enclose attested t	onoto copies o	1 CCI tillicates all	
13. Educational Q	ualifications.	(Directore accepted)	_		CC

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						
3	DM/MCH						
4	Others		*:				

14. Educational experience:-

	14. Educational experience:		To	Duration	Name of
No.	Designation	From	То	Dan acron	the Institution
1	Professor				
2	Associate Professor			- 1 4 D G 3 2 3	
3	Asstt. Professor				
4	S.R. / Tutor / Demonstrator				

(Attach experience certificate)

15. Research Publications:-

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

(Attach Photo Copy)

(Attach Thoto Copy)	Work Covernment or Public Sector are
16 If condidates serving in Govern	ment/ Quasi Government or Public Sector are
10.11 Candidates serving	a vic 11 com their employer at the time of
advised to submit 'No Objection	Certificate' from their employer at the time of
adviscu to submit 110 33	11.1
interview, failing which their can	didature may not be considered.
IIILEI VICW, Idillia William	

17. List of attached certificates as per checklist	
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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.

Date	Full Name and Signature of the Applicant
Place	

Checklist

1. Demand Draft	
2. Self-Attested Photograph	
3. Aadhar Card & Pan Card	
4. Category Certificate	
5. DOB Certificate /High School Certificates	
6. UG, PG Degree	
7. UG,PG Registration	
8. Experience Certificates	
9. Research Publications	
10. NOC if in Government Service	
Place:	Signature of the applican
Date:	