## कार्यालय, प्रधानाचार्य / नोडल अधिकारी, स्वशासी राज्य चिकित्सा महाविद्यालय सोसाइटी, एटा, उत्तर प्रदेश

ई—मेल: deansnmc@yahoo.in, gmcetah@gmail.com,

वेबसाइट: <u>http://www.snmcagra.ac.in,</u> asmcetah.org, www.dgmeup.in पत्रांकः मे0का0एटा / 2021 / **746** 

दिनॉकः 08/11/2021

ादनाकः 08/11/2021
—:विज्ञप्तिः—
स्वशासी राज्य चिकित्सा महाविद्यालय सोसाइटी, एटा के लिए आचार्य, सह आचार्य एवं सहायक आचार्य के नियमित पदों हेतु
निर्धारित प्रपत्र में आवेदन पत्र आमंत्रित किये जाते हैं। पदों की संख्या निम्नवत है:—

		आच	वार्य	सह आच	गर्य	सहायक आचार्य		
कo संo	विशिष्टता	पदो की संख्या	श्रेणी -	पदो की संख्या	श्रेणी 👡	पदो की संख्या	श्रेणी	
1	आर्थोपेडिक्स			01	SC			
2	आप्थलमोलॉजी			-		01	SC	
	10	04		01	UR	-	-	
3	आब्सट्रेटिक्स एण्ड गायनकोलॉजी	01	SC	01	UK	01	OBC	
4	इमरजेन्सी मेडिसिन			01	OBC	01	UR	
5	एनाटमी	_		- 1	-	01	SC	
700	1 00 1 70			01	SC	01	OBC	
6	एनेस्थीसियोलॉजी	-	-	01	UR	01	UR	
7	ओटो-राइनो-लैरिंगोलॉजी			-		01	OBC	
8	कम्युनिटी मेडिसिन			-		01	EWS	
				01	OBC	01	SC	
9	जनरल मेडिसिन	01	OBC	01	UR	01	UR	
	× Harris Control			01	UK	01	OBC	
		01	UR	01	OBC EWS	01	UR	
10	जनरल सर्जरी			01		01	SC	
				01	LVVJ	01	UR	
11	ट्यूबरकुलोसिस एण्ड रेस्पिरेटरी मेडिसिन/ पल्मोनरी मेडिसन	-	-	01	SC		-	
12	डर्मेटोलॉजी वेनेरोलॉजी एण्ड लेप्रोसी			01	UR			
13	डेन्टिस्ट्री	-		-			-	
14	पीडियाट्रिक्स	-		01	OBC			
15	पैथोलॉजी							
16	फार्माकोलॉजी			01	SC			
47	फिजियोलॉजी	01	SC	_		01	OBC	
17		01	30			01	EWS	
18	फोरेन्सिक मेडिसिन					01	SC	
19	बायोकेमिस्ट्री	01	UR	01	OBC			
19		01	011			01	OBC	
20	माइकोबायोलॉजी	-				01	UR	
21	रेडियो—डायग्नोसिस	-		01	OBC	01	SC	
22	साइकियाट्री		-	01	EWS			

-: Qualifications:-

Posts	Academic Qualification	Teaching & Research Exp.
Professor	A post graduate qualification MD/MS/DNB in the concerned subject and as per these Regulations	(i) Associate Professor in the subject for 3 years in a permitted/approved/ recognized medical college/institution with four Research publications (at least two as Associate Professor) (only original papers, meta-analysis, systematic reviews, and case series that are published in journals included in Medline, Pubmed Central, Citation index, Sciences Citation index, Expanded Embase, Scopus, Directory of Open access journals (DoAJ) will be considered). The author must be 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 NMC.  (iii) Should have completed the Basic course in biomedical research from Institution(s) designated by NMC. Further provided that for the transitory period of 2 years w.e.f. the date of this notification, the appointment/ promotion to the post of Professor can be made by the institution in accordance with the "Minimum Qualifications for Teachers in Medical Institutions Regulations, 1998" as prevailing before issuance of this notification.
Associate Professor	A post graduate qualification MD/MS/ DNB in the concerned subject and as per these Regulations	(i) As Assistant Professor in the subject for 4 years in a permitted/approved/recognized medical college/ institution with two Research publication (only original papers, meta-analysis, systematic reviews, and case series that are published in journals included in Medline, Pubmed Central, Citation index, Sciences Citation index, Expanded Embase, Scopus,

		Directory of Open access journals (DoAJ) will be considered). The author must be amongst first three or should be 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 Bio Technology (DBT) or any such body.  (iii) Should have completed the Basic course in Medical Education Technology from Institution(s) designated by NMC  (iv) Should have completed the Basic course in biomedical research from Institution(s) designated by NMC. Further provided that for the transitory period of 2 years w.e.f. the date of this notification, the appointment/promotion to the post of Associate Professor can be made by the institution in accordance with the "Minimum Qualifications for Teachers in Medical Institutions Regulations, 1998" as prevailing before issuance of this notification.
Assistant Professor	A post graduate qualification MD/MS/DNB/MDS in the concerned subject and as per these Regulations.	3 years Junior Resident in a recognized permitted medical college in the concerned subject and one year as Senior Resident in the concerned subject in a recognized permitted medical college. In case of DNB candidate equated to MD/MS in terms of clause 4A of Schedule-I, in addition to 3 year teaching experience in the subject as Resident/ Registrar/ Demonstrator/ Tutor/ or work experience gained during DNB training, one year as Senior Resident in the concerned subject in a recognized/permitted medical college.  Note: Non-medical teachers may be appointed in pre clinical departments as per NMC Rules and as per requirement.

शैक्षिक योग्यता एव अनुभव एन०एम०सी० के मानक के अनुसार ही मान्य होगा

1. आयु:— उपर्युक्त पदों के लिये अभ्यर्थी की आयु कैलेण्डर वर्ष की 01 जुलाई, 2021 को न्यूनतम उम्र 26 से कम एवं अधिकतम उम्र 65 वर्ष से अधिक नहीं होनी चाहिये।

2. वेतनमान:-(क) आचार्य- एकेडमिक लेवल-14 इन्ट्री पे रू०-1,44,200.00(ख) सह आचार्य- एकेडमिक लेवल-13ए इन्ट्री पे रू०-1,31,400.00

(ग) सहायक आचार्य- एकेडमिक लेवल-11 इन्द्री 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. 500.00 का आवेदन शुल्क डिमाण्ड ड्राफ्ट के रूप में "स्वशासी राज्य चिकित्सा महाविद्यालय सोसाइटी, एटा" 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 अन्यर्थी निर्धारित प्रपत्र पर पूर्ण रूप से भरे हुये आवेदन (आवेदन प्रपत्र वेबसाइट http://www.snmcagra.ac.in एवं www.dgmeup.in एवं www.asmcetah.org से भी डाउनलोड कर सकते हैं) सभी प्रमाण—पत्रों के साथ दिनॉक 28.11.2021 को साथ 05 बजे तक प्रधानाचार्य कार्यालय, वीरांगना अवन्तीवाई लोधी स्वशासी राज्य चिकित्सा महाविद्यालय एटा के माध्यम से उपलब्ध कराया जाना सुनिश्चित करें।

7. अन्तिम तिथि एवं समय के पश्चात तथा अपूर्ण आवेदन पत्र स्वीकार नहीं किये जायेंगे।

आरक्षित श्रेणी के अभ्यर्थियों के जाति प्रमाण पत्र उ०प्र० राज्य सरकार द्वारा निर्गत ही मान्य होंगें।

 साक्षात्कार की तिथि एवं स्थान की सूचना अभ्यर्थियों को वाद में प्रेषित की जायेगी। तथा साक्षात्कार में आने जाने हेतु कोई भी यात्रा भत्ता देय नहीं होगा।

Qualification and pay scale for selected candidates as Designated Professor and Designate as 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 Hospitals as professor shall 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 NMC norms.
- 2. Designated as 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 owned & managed by State Govt/Central Govt. as Associate professors shall be more than 10 years with Two Research publication in indexed journals as 1<sup>st</sup> Author or corresponding author. Such Consultant or Specialist after joining a medical college shall be designated as "Associate Professor"

वेतनमान आदि:- मूल विभाग से प्राप्त देयतायें, वेतन, पेंशन एवं ग्रेच्युटी आदि यथावत देय होंगी।

 Designate Professor and Designate as Associate Professor will be considered on deputation from their parent department.

स्वशासी राज्य चिकित्सा महाविद्यालय सोसाइटी, एटा

A. S. M. C.

# AUTONOMOUS STATE MEDICAL COLLEGE SOCIETY, ETAH

## **Application Format**

Adve	ertisement Numb	er and Date						
Post.			(Т	he Post for	which the applic	ation is being ma	de)	
	e: - All informati L- Name of App						Attested Photo	
2	2- Male / Femal							
3	3- Father / Hush	oand's Name (in	cludin	g Surnam	ie)			
2		ess of Residenc						
		e City						
	Mobile Nur 5- Permanent a	nber ddress						
88 99	Name of th	e Citynbernumber (if Any) (enclose the mant as on 01-07 larital Status- Mage	ark she -2021. Iarried	et of high	ne Non school exam Day	ination)	. Year.	
-		ed						
	a- MBBS/BD: b- MD/ MS/N c- MCH/ DM d- Others	S MDS	me of	the Medi	cal Council and	d Date		
	3-Educational C							)
No.	Name of the Examination	Institution / Board / University	Year	Subject	Marks Obtained / Max Marks	Total Marks / percentage	effort %attempt s%	
1	MBBS/BDS							

2	MD/MS/MDS/ M.Sc.				
	M.Sc.				
3	DM/MCH				
4	Others	2		- 3	

### 14-Educational experience:-

No.	Designation	From	То	Duration	Name of the Institution
1	Professor				
2	Associate Professor				
3	Asstt. Professor				-
4	S.R. / Tutor / Demonstrator			Ţ	

(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)

16	-If o	candi	dat	es se	erving in G	overnment/	Quas	i Gove	ernment d	r P	ublic	Secto	r a	re advise	30
	to	subn	nit	'No	Objection	Certificate'	from	their	employe	at	the	time	of	interviev	W
	fai	ling w	vhic	h th	eir candida	ature may n	ot be c	consid	ered.						

17-List of attached certificates as p	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 Si	gnature of the Appli	cant