



भारत सरकार /Government of India
स्वास्थ्य और परिवार कल्याण मंत्रालय /Ministry of Health and Family Welfare
प्रधान मंत्रीस्वास्थ्य सुरक्षा योजना /PMSSY
अखिल भारतीय आयुर्विज्ञानसंस्थान/ All India Institute of Medical Sciences
मंगलगिरि, आंध्रप्रदेश/ Mangalagiri, Andhra Pradesh

F.No: AIIMS/MG/Admin/RecruitMatt/03/Non Faculty/SR/2018-19/01F

Date: 04-02-2019

NOTICE

**(Interview Schedule and Proforma for Recruitment of Senior Residents in
AIIMS Mangalagiri)**

With reference to the notice no: **AIIMS/MG/Admin/RecruitMatt/03/Non Faculty/SR/2018-19/01D** dated **25-01-2019**, it is informed that the Screening test/oral interview will be conducted in the below mentioned dates/sessions and place, after proper verification of documents.

The candidates should report to the **Administrative Office, AIIMS Temporary Campus, First Floor, Government Siddhartha Medical College, NH 16 service road, Gunadala, Vijayawada 520008** in the scheduled reporting time. ***The Interview will start sharp from the scheduled Reporting time.***

Screening Test:

Date	Department	Reporting Time
12-02-2019	Dentistry	9.00 A.M.

Oral Interview:

Date	Department	Reporting Time
12-02-2019	Orthopaedics	7.00 A.M.
	Microbiology	7.00 A.M.
	Dermatology	7.00 A.M.
	Anaesthesia	7.00 A.M.
	Ophthalmology	7.00 A.M.
13-02-2019	Radio Diagnosis	7.00 A.M.
	Dentistry	7.00 A.M.
	Pathology	7.00 A.M.
	General medicine	7.00 A.M.

**Deputy Director (Administration),
AIIMS Mangalagiri**

All India Institute of Medical Sciences, Mangalagiri (Andhra Pradesh)

Proforma/Check list for the Post of Senior Resident to be filled and submitted during Document verification

Name of the Candidate: _____ Application No. _____

Father's Name: _____ Mobile Number: +91 _____

Name of the Department _____ Date of Birth: _____ Category: _____

Qualifications

S. No.	Course / Qualification	Name of College/Institute (with year of passing)	Total Extra Attempt	Total Marks	Marks Obtained	% age
1.	M.B.B.S./ BDS					
2.	MD/MS/DNB/ MDS					
3.	DM/M.Ch					
4.	Extra Qualification if any					

Total Experience: _____ Year's _____
Months

Research Publications (in Nos.): Index National Journal _____ Index International Journal _____

Declaration

I hereby declare that the entries made in this form as above are true and correct to the best of my knowledge and belief. In case of any information being found false/incorrect my candidature/services are liable to be terminated without any notice.

Signature of the Candidate with date

For office use only. **Documents Attached in serial order to be submitted during document verification(4 sets of Photocopies):**

1	Original Application Form filled by the candidate as per the Advertisement (Annexure 1)	Yes/No
2	Filled in Proforma/Checklist for the Senior Resident in the given format	Yes/No
3	Identity Proof (Preferably Aadhar Card)	Yes/No
3	Certificate showing Date of Birth. (10 th Certificate/ Birth Certificate).	Yes/No
4	MBBS/ BDS Marksheets & Certificates.	Yes/No
5	MD/MS/DNB/DM/M.Ch./MDS Marksheets & Certificates.	Yes/No
6	Attempt Certificate (For MBBS and Post Graduation)	Yes/No
7	FMGE Certificate conducted by NBE (For Foreign Graduate)	Yes/No
8	Registration with Medical Council of India/ State Medical Council/ Dental Council of India or State	Yes/No
9	No Objection Certificate in case of Govt. / Semi-Govt., PSU Employee	Yes/No
10	Experience Certificate.	Yes/No
11	Reservation category Certificate (OBC*/SC/ST/PH) (*Candidate should belong to non-creamy layer of Central List of OBC).	Yes/No
12	Publications.	Yes/No
13	Any other relevant documents.	Yes/No

Final Remarks _____

Verified By
Name with Signature