



MADHAV INSTITUTE OF TECHNOLOGY & SCIENCE, GWALIOR-05

(Estd. 1957 - A Govt. Aided UGC Autonomous & NAAC Accredited Institute Affiliated to RGPV, Bhopal)

Ph.: 0751-2409397

Ref. No. Advt. (Cont.)/HR/2022

Date 20.05.2022

DOCTOR (PART TIME) ENGAGEMENT

Applications are invited from the eligible candidates in prescribed proforma for the appointment/engagement of Doctor (Part Time) on purely temporary basis for Medical Dispensary. Eligible candidates having the minimum qualification as per the following may apply:

<i>Consolidated Remuneration</i>	<i>Minimum Qualification</i>
Negotiable at the time of interview as per number of days and hours of visits.	MBBS Degree From any recognized University. Minimum two years working experience of OPD conduction in Institute/University.

Note :-

1. Preference will be given to candidates with higher qualification and experience of OPD conduction.
2. Preference will be given to Ex-Serviceman & local Gwalior residents.
3. Retired persons may also apply.

HOW TO APPLY:

Interested candidates are required to submit the application in prescribed format on institute website www.mitsgwalior.in along with the necessary enclosures and a Demand Draft (Non Refundable) of Rs. 1000/- (Rs. 800/- for SC/ST of MP Domicile) drawn in favour of “**Director, MITS, Gwalior**” should be submitted to the office of the **Director, MITS, Gwalior** on or before **15/06/2022 up to 04:00 p.m.** in the A 4 size envelope.

CANDIDATES ARE ADVISED TO READ THE FOLLOWING IMPORTANT NOTES/INSTRUCTIONS CAREFULLY BEFORE FILLING UP THE APPLICATION FORM

1. Slip should be pasted on the A 4 size envelope.
2. Canvassing in any form and/or bringing in any influence political or otherwise will be treated as a disqualification for the post.
3. No interim enquiries/correspondence/communication of any sort will be entertained on the matter.
4. Application incomplete in any respect and not accompanied by relevant certificates/documents /photograph/required fee may be rejected.
5. All qualifications, experience will be considered as on the last date of the submission of application form.
6. The contract appointment will be for the maximum period of eleven months.
7. The contract services may be terminated at a notice of seven days.

DOCUMENTS/CERTIFICATES REQUIRED AT THE TIME OF INTERVIEW

- i) Matriculation/10th Standard or equivalent certificate indicating date of birth, or mark sheet of Matriculation/10th standard or equivalent issued by Central/State Board indicating date of Birth in support of their claim of age. Where date of birth is not available in certificate/mark sheet issued by concerned Educational Board, School leaving certificate indicating date of Birth will be considered.
- ii) Degree/Diploma certificate/mark sheet pertaining to all the academic years as proof of educational qualification claimed.
- iii) Caste certificate of SC/ST/OBC, if applicable in the prescribed performa only from the competent authority indicating clearly the candidate's Caste, the Act/Order under which the Caste is recognized as SC/ST/OBC and the village/town the candidate is ordinarily resident of.
- iv) Experience certificate for the proof of OPD conduction.
- v) **No TA/DA will be admissible for attending an interview.**

Important Note:-

- **The schedule of Interview will be notified on Institute Website.**
- **Candidates are advised to visit the institute website regularly for further information/update.**

(DIRECTOR)



MADHAV INSTITUTE OF TECHNOLOGY AND SCIENCE, GWALIOR-05

Application for (Contract Basis)

Advertisement No. : Advt./HR./2022/

Personal Details

Affix
Self-attested
Photograph

Post Applied for: Department :

Name : Date of Birth :

Gender : Category :

Father's Name : Marital Status :

Phone : Mobile No. :

Address :

Pin code : Email :

Payment Details

Demand Draft No.: Bank Name:

Amount: Date: City:

Academic & Professional Qualification

Examination	Year	Name of Board University/Institute	Division & Merit	% of Marks	Main Subject
UG					
PG					
Other					

Work Experience (TotalYears.....Months)

Name of Post Held & Pay Scale	Name of Employer	Date of Joining	Date of Leaving	Total Experience	Encl No.

Note: Photocopy of Testimonials enclosed:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

DECLARATION

I hereby, declare that all the information given above is true to the best of my knowledge and belief and in case if proved otherwise, my candidature shall be cancelled.

Date :.....

Place :

Signature of Candidate

()