BANARAS HINDU UNIVERSITY

(Established by Parliament by Notification 225 of 1916)

NOTIFICATION FOR JOB

Applications are invited for 05 post of Staff Nurse (contractual) on the prescribed proforma for the Ministry of Health & F.W., Govt. of India Sponsored "National Programme for Health Care of Elderly (NPHCE)" at Department of Geriatric Medicine, Institute of Medical Sciences, BHU, Varanasi – 221005 under Prof. Anup Singh, Department of Geriatric Medicine, Head & Nodal Officer. (Development Scheme No. NPHCE-4191).

- 1. The application form and other details given below.
- 2. No TA/DA will be paid for attending walk in interview.
- 3. Incomplete application form will not be entertained.
- 4. Application should be typed on A4 size paper (Proforma Enclosed) and each Application should accompany with relevant certificate duly attested, complete <u>valid email id</u> and working mobile number.
- 5. Application can be given in Hindi or English.
- 6. Those who are in service should apply through proper channel.
- 7. Candidate with experience of work in the area of the old age health care (Geriatric) or Related field will be preferred.
- 8. All things being equal, SC/ST candidates will be preferred as per GOI/BHU guidelines.
- 9. Degrees must be from the recognized Institution/University.
- 10. Reservation for reserved category will be done as per University rules as for the project.

11. The Last day of accepting the application form in the office of Geriatric Medicine will be 18.12.2020

Dr. Anup Singh NODAL OFFICER NPHCE - RGC Devp. Scheme No - 4191

Prof. Anup Singh (Nodal Officer & Head) Deptt. of Geriatric Medicine. Institute of Medical Sciences Banaras Hindu University Varanasi -221005 (UP) 12. The details of the post and salary are as follows:

| S. No. | Name of Post | Vacancy | Salary & Wages (consolidated) |
|--------|---------------------------|---------|-------------------------------|
| | | | Per month in Rs. |
| 01. | Staff Nurse (contractual) | 05 | 15,000/- (Fix) |

NOTE:

- 1. The posts are purely contractual and extension will be provided as per NPHCE Norms based on work satisfaction on quarterly basis.
- The qualification in exceptional situation will be relaxed by the Selection Committee/Nodal Officer & his decision will be final.
- 3. The services of applicants can be terminated at one month notice if work or behavior is found unsatisfactory.
- 4. The Nodal Officer reserves the right to cancel/modify or invite any person as per requirement of the Scheme.
- 5. Age Limit: As per BHU rules, relaxable in exceptional circumstances & the decision of the Nodal Officer will be final.
- 13. Details of qualification for the post & format of Application forms are as follows:

| S. No. | Name of Post | No. | Qualification |
|--------|------------------------------|-----|---|
| 01. | Staff Nurse (contractual) | 05 | *E.Q. – BSc. Nursing /Diploma in GNM from a recognized College/University having 2 years of Experience D.Q. –Experience of working in |
| | | | Geriatric Medicine Unit. |

All communication will be done by specified e-mail id / Mobile number in future.

*E. Q.: Essential Qualification. Q.: Desirable Qualification

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BANARAS HINDU UNIVERSITY

APPLICATION FORM

NPHCE - Regional Geriatric Centre, IMS, BHU

Adv. No. 03 NPHCE 2019-20

Post Applied for.....

| 1. Name (In Block Letters): | Affix your recer | | | |
|---|------------------|--|--|--|
| 2. Present Designation: | Passport size | | | |
| 3. Date of Birth: | Photo | | | |
| | | | | |
| 5. Father's Name/Husband's Name: | | | | |
| 6. Mother's Name: | | | | |
| 7. Marital Status: | | | | |
| 8. Nationality: | | | | |
| | | | | |
| 9. Indicate, if SC/ST/OBC: | ••••• | | | |
| 10. Address for Correspondence (with Pin code): | | | | |
| | | | | |
| | | | | |
| Talanhana Na (With STD Code). * Mabila Na + (mandatory) | ` | | | |
| Telephone No. (With STD Code):* .Mobile No. : (mandatory) | | | | |
| *E-mail: (mandatory) | | | | |
| 11. Permanent Address (with Pin code) | | | | |
| | | | | |
| | | | | |
| | | | | |
| Telephone No. (With STD Code): | ·) | | | |
| E-mail: (mandatory) Fax No.: | | | | |
| 12. Distinctions/Prizes/Awards/Medals/Honors etc | | | | |
| 13. Whether you are conversant with Computer (Specify) | | | | |
| | | | | |
| | | | | |

| 14. Academic Qualifications (| Matric onwards) |): |
|-------------------------------|-----------------|----|
|-------------------------------|-----------------|----|

| Examination Passed | Board/University | Year of Passing | Percentage of Marks Obtained | Division/Class /Grade/Merit |
|--|------------------|--------------------|------------------------------------|--------------------------------|
| High School/Matric or Equivalent | | | | |
| Intermediate/Hr. Sec. /PUC or equivalent | | | | |
| MBBS/B.Sc. / B. Tech. or Equivalent | | | | |
| M.D. /M. Sc. /M. Tech. or Equivalent | | | | |
| Other Examinations, if any | | | | |

15. Appointments held or Experience, if any:

| Designation & Name of Institution | Date | | Salary with Grade | Nature of Duties | Reason for leaving |
|---|---------|---------|----------------------|---------------------|-----------------------|
| | Joining | Leaving | | | |
| | | | | | |
| | | | | | |

16. Additional Information, if any (please use separate sheet):

17. Declaration: I declare that:

- The information's given above are complete and correct;
 Neither any disciplinary proceeding is Pending nor contemplated against me;
 I have never been dismissed from service nor debarred from holding any future appointment nor convicted for any offense. No criminal case is pending against me.
- **4.** In case of concealment/ suppression of facts (s), which may be detected at any stage in future, my appointment is liable to be cancelled/terminated, as the case may be, without notice.

| Date: | Signature of the Applicant |
|-------|----------------------------|
| | |

18. Endorsement by Employer: