

NEW DELHI MUNICIPAL COUNCIL
PALIKA KENDRA, NEW DELHI
HEALTH ESTABLISHMENT, UNIT-II

WALK-IN-INTERVIEW

EMPLOYMENT NOTICE FOR THE POST OF HOMOEOPATHIC PHYSICIAN ON CONTRACT BASIS

Applications are invited for filling up 02 post (one for the post lying vacant and one for leave reserve vacancy) on contract basis for a period of six months. The details are as under:-

Sr. No.	Category & No. of Posts	Age	Consolidate contractual salary	Educational Qualification with Experience
1.	Homoeopathic Physician 02 Post	Maximum 35 Years (relaxable by 5 years for SC/ST and 3 years for OBC)	₹ 61662/- P.M. excluding HRA & Car allowance	(1) Degree in Homoeopathy of a recognized University / Statutory State Board/council or equivalent recognized under the homoeopathic Central Council Act, 1973 (59 of 1973) (2) Enrolment on the Central register of Homoeopathy or a State register of Homoeopathy.

Note: These appointments will be made initially for a period of six months or till filling up the vacancies on regular basis whichever is earlier.

The Walk-in-interview for the post of **Homoeopathic Physician** will be held on **25.03.2015** in the **Chamber of Secretary, NDMC, 3rd Floor, Palika Kendra, New Delhi at 11:00 A.M.**

Candidates are requested to submit their **BIODATA (as per format enclosed), ONE SET OF ATTESTED PHOTOCOPIES OF CERTIFICATES INCLUDING 2 PHOTOGRAPHS AND ALL THE ORIGINAL TESTIMONIALS** at least one hour before start of Walk-in-interview..

No TA/DA will be paid.

The number of posts are subject to change without notice.


(Secretary)

APPLICATION FOR THE POST OF HOMOEOPATHIC PYSICIAN

1. Name of the candidate: _____
2. Father's/'Husband Name: _____
3. Date of Birth: _____
4. Postal Adress: _____
5. Permanent Adress: _____
6. Category SC/ST/OBC(OBC of Delhi Only) _____
7. Telephone No.: _____
8. Date of completion of Internship: _____
9. Academic Qualification: _____
10. Central register of Homoeopathy or a State register of Homoeopathy No. _____
11. Experience: _____

I solemnly declare that the above statements made by me are correct to the best of my knowledge and nothing has been concealed thereof.

(Signature of Applicant)

Place _____

Date _____