



जवाहरलाल स्नातकोत्तर आयुर्विज्ञान शिक्षा एवं अनुसंधान संस्थान  
**JAWAHARLAL INSTITUTE OF POSTGRADUATE MEDICAL EDUCATION & RESEARCH**  
(स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार के अधीन राष्ट्रीय महत्व का संस्थान, भारत सरकार)  
(An Institution of National Importance under Ministry of Health & Family Welfare)  
धन्वंतरि नगर, पुदुच्चेरी/Dhanvantari Nagar, Puducherry 605 006



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No. Admin-I/JR-NPG-D/12/2023

Dated: 15-03-2023

## **RECRUITMENT TO THE POST OF JUNIOR RESIDENT (NPG-DENTISTRY)**

Applications are invited by the Director, JIPMER from eligible Indian citizens for filling up the posts of JUNIOR RESIDENT (NPG-Dentistry) on tenure basis (for a period of 12 months) through written test followed by Interview (through videoconferencing).

Name of the Post	Total	Category wise posts				
		UR	OBC	SC	EWS	ST
Junior Resident (NPG-Dentistry)	02	02	-	-	-	-

**BASIC PAY** The Junior Residents (NPG-Dentistry) will be paid B/Pay ₹ 56,100 Level 10, Cell-1 (Revised) per month with other allowances inclusive of NPA as admissible under rules (Total ₹ 95,000 Approximately).

### **EDUCATIONAL QUALIFICATION**

- The candidates should have passed **BDS** (including completion of one year Internship) or equivalent degree recognized by Dental Council of India.
- Only those candidates who have passed **BDS** (including Internship) not earlier than two (2) years before the last date of online application will be considered. It implies that those who have completed **BDS** or equivalent course (including completion of internship) **between 03-04-2021 and 02-04-2023 will be considered.**
- Those who had joined Junior Residency (NPG-Dentistry) anywhere else and whose services were terminated on account of unauthorized absence or any other disciplinary/ground, will be ineligible to be considered for these JR (NPG-Dentistry) post even if they otherwise qualify.
- The above vacancies are provisional and subject to variation. The Director, JIPMER, Puducherry reserves the right to vary the vacancies. The reservation will be followed as per Government of India Rules.

### **SCHEDULE OF WRITTEN TEST & INTERVIEW THROUGH VIDEOCONFERENCING**

Selection of candidates will be based on Written test & interview through videoconferencing:-

Date of Written test	8 <sup>th</sup> April 2023 (Afternoon)
Date of Interview through videoconferencing	12 <sup>th</sup> April 2023

Please visit our website: <https://jipmer.edu.in/> regularly for latest notifications/announcements and any Addendum/Dedendum/Corrigendum/Latest updates etc. as these will be uploaded only in the JIPMER website.

Eligible candidates who have applied for the **Junior Resident (NPG-Dentistry)** may attend the written test to be held at **01.30 PM on 08-04-2023 (SATURDAY) at JIPMER ACADEMIC CENTRE, JIPMER, PUDUCHERRY-605 006.**

## **APPLICATIONS FEES**

₹ 500 for General (UR), OBC (NCL) & EWS candidates and ₹ 250 for SC/ST candidates. The Fee is exempted for Persons with Benchmark Disabilities (PwBDs). Kindly note that the bank may charge an additional service charges for making online payment. The application fee once remitted will not be refunded at any circumstances.

## **MODE OF PAYMENT (Only online payment through SBI collect)**

The mode of payment will be made only through SBI Collect (Online Payment) & No other mode of payment (DD/Cheque/MO/IPO/CRF/Cash etc) will be entertained.

## **HOW TO MAKE PAYMENT**

1. Visit <https://www.onlinesbi.sbi/sbicollect/icollecthome.htm>
2. Click the Checkbox & Proceed.
3. Under select category Click on "Educational Institutions".
4. Under select payee - search "JIPMER" and click on "JIPMER; Pondicherry".
5. Select **RESIDENT RECRUITMENT FEE** from the drop down list of select payment category and fill the following details carefully:

- \* Notification No. : **Admin-I/JR-NPG-D/12/2023**
- \* Date and month of Notification : **15-03-2023**
- \* Name of the Applicant :
- \* Date of Birth :
- \* Name of the Post : **JUNIOR RESIDENT NPG DENTISTRY**  
(from the drop down list)
- \* Name of the department : **DENTISTRY**
- \* Educational Qualification :
- \* Category of the Applicant :
- \* Contact No :
- \* Email :
- \* Communication Address :
- \* Application Fee (from the drop down list i.e. **₹ 500 for UR /OBC/EWS & ₹ 250 for SC/ST**).

6. Provide all the details which are mandatory and proceed with the payment.
7. On completion of payment, save the e-Receipt and the same should be uploaded along-with the required documents in "Google Forms" for reconciliation.

## **HOW TO APPLY?**

### **Submission of application: Through On-line mode only.**

1. Candidates are informed to apply on-line mode only.  
(Any other mode of applications will not be accepted / considered)
2. Log on to link in the Home page <https://jipmer.edu.in/> and click "Apply on-line to the post of Junior Resident (NPG-Dentistry) at JIPMER, Puducherry".

(OR)

Candidate should click the following link (Ctrl + Click) or copy and paste the URL in Google chrome / Internet explorer / Mozilla Firefox.

<https://forms.gle/NEdaqGTB7zhE1v8d7>

3. The candidate should acquaint himself/herself with all requirements with regard to filling up the application on-line.
4. The last date of submission of online application is **03-04-2023 (Monday) till 04.30 PM.**
5. Candidates are advised **NOT TO SEND HARD COPY** of the application with documents by postal/courier/by hand.

**Steps to be followed for online application form:**

1. Candidate should have valid Gmail id login to apply.
2. Candidate should click the link (Ctrl + Click) (OR) copy and paste the URL in Google chrome / Internet explorer / Mozilla Firefox.  
<https://forms.gle/NEdaqGTB7zhE1v8d7>
3. Login page will appear. Enter the username and password of your Gmail id.
4. After login, the details required in the form to be filled by the candidate.
5. Candidate should make payment of application fees before applying to the post and fees payment receipt should be uploading in the "**Google Forms**".
6. Candidate should upload the following documents in the online application form:
  - (a) Photo (Candidate must have in softcopy/digital **of PASSPORT SIZE PHOTOGRAPH** [30mm width x 45mm Height] and save it as "**Candidate Photograph.jpg**" provided by photographer. Keep size of photograph minimum size 20KB, as the maximum size limit is 200KB.  
  
Candidate should scan the certificates separately (Whichever is applicable) and save it as JPEG/JPG/PDF format. Keep size of Certificate within limit 1 MB (Maximum size will be allowed for uploading the certificates)
  - (b) Internship Certificate
  - (c) Dental Council Registration Certificate.
  - (d) Fees payment receipt (No fee is required to be payable by Persons with Benchmark Disabilities [PwBD's] candidates).
  - (e) Bio data – **Annexure-I** to be downloaded duly filled by typing or by hand writing & signed by the candidate with affix recent photograph and the same to be uploaded.
  - (f) Community Certificate (fees purpose only)
  - (g) The disability certificate should be issued by a duly constituted and authorized Medical Board of the State or Central Govt. Hospitals/Institutions and countersigned by Medical Superintendent/CMO/Head of Hospital/Institution in the prescribed form as per **Annexure-II** (applicable only for fee concession).
  - (g) No Objection Certificate (if applicable).
7. After uploading and filling the application form, the candidate should submit the application form.

**Candidates already worked as Junior Resident (NPG-Dentistry) for a period of One year on Regular / Ad-hoc / Contract basis in any of the Central / State / Semi Govt. / Autonomous Organizations are NOT ELIGIBLE to apply. For candidates worked below One year, the duration of Junior Residency already done will be reduced from the 12 months tenure to be offered.**

## **SELECTION PROCEDURE**

1. A written Examination based on **MCQs in the subject concerned** will be conducted for eligible candidates.
2. Suppose, more number of candidates happens to appear for the written examination, as per directives of Central/State Govt. norms for Covid-19 pandemic, examination may be conducted in two shifts on the same day. In this regard, this Institute reserves the right to take the final decision.
3. **Candidates will be shortlisted for interview through videoconferencing based on their written test marks. List of short listed candidates will be published in our website. In this regard, this Institute reserves the right to take the final decision.**
4. **Details of Videoconferencing will be sent to the shortlisted candidates through SMS or e-mail by this institute.**
5. Selection process for the post of Junior Resident (NPG-Dentistry) will include a **written examination (85%) and interview through videoconferencing (15%).**

## **GENERAL INSTRUCTIONS**

1. Self-declaration stating that he/she has not been worked as Junior Resident (NPG-Dentistry) for a period of one year (Regular/Ad-hoc/Contract) in any Central/State Govt./Semi Govt. Autonomous body (**Annexure-III** to be submitted at the time of written test).
2. The candidates who are in service in any Govt. Hospital /Institutions are required to submit **"No objection Certificate"** from the present employer (**Annexure-IV** to be submitted at the time of written test - if applicable).
3. The candidates are advised not to bring any political or other recommendations to influence their selection. Such candidates will be summarily rejected.
4. The posts are purely on tenure basis (temporary) and under no circumstances are linked to regular appointment and cannot be regularized at any stage.
5. The appointment will be temporary and subject to termination at one month's notice and without assigning any reason. If he/she wishes to resign his/her job, he/she has to serve one month's notice or remit one month's salary or pay thereof, as the case may be proportionate to the shortfall in the notice period. In this regard decision of the Director will be final.
6. The Competent Authority reserves the right of any amendment, cancellation and changes to this advertisement as a whole or in part without assigning any reason or giving notice.
7. The appointee shall not be entitled to avail any allowances/facilities being extended to the regular/permanent faculty members of the JIPMER, Puducherry-06.

**DIRECTOR**

**BIO-DATA**

1. Applicant's Name (in **BLOCK LETTERS**) :
2. Father's Name :
3. Date of Birth :
4. Educational/Academic/Technical/Professional Qualifications:-

Affix here  
recent  
photograph

<b>Examination Passed</b>	<b>Subject</b>	<b>Name of College/ Institution</b>	<b>Name of University</b>	<b>Year of Passing with % of Marks</b>	<b>No. of attempts</b>
B.D.S					

5. Experience:-

<b>Post held</b>	<b>From</b>	<b>To</b>	<b>Organization/ Employer's Name &amp; Address</b>

6. Details of prizes,

1. Medals :
2. Scholarships :
3. National/ International Awards, if any :

7. Any other information of meritorious nature.

**DECLARATION to be signed by the candidate**

I hereby declare that I am an Indian National and all statements made in this bio-data/application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my appointment will be liable to be terminated without any reason or prior notice. I also understand that in case of my final selection, my appointment will be provisional subject to satisfactory police and document verification.

Date:

Place:

**(Signature of the applicant)**

**NAME & ADDRESS OF THE INSTITUTE/HOSPITAL**

Affix here recent attested Photograph showing the disability duly attested by the chairperson of the Medical Board

Certificate No. \_\_\_\_\_

Date: \_\_\_\_\_

**DISABILITY CERTIFICATE**

This is certified that Shri/Smt/Kum..... son/wife/daughter of Shri.....of..... age..... sex.....identification mark(s) is suffering from permanent disability of following category :-

**A Locomotors or cerebral palsy:**

- (i) BL-Both legs affected but not arms.
- (ii) BA-Both arms affected
  - (a) Impaired reach
  - (b) Weakness of grip
- (iii) BLA-Both legs and both arms affected
- (iv) OL-One leg affected (right or left)
  - (a) Impaired reach
  - (b) Weakness of grip
  - (c) Ataxic
- (v) OA-One arm affected
  - (a) Impaired reach
  - (b) Weakness of grip
  - (c) Ataxic
- (vi) BH-Stiff back and hips(Cannot sit or stoop)
- (vii) MW-Muscular weakness and limited physical endurance

**B Blindness or Low Vision:**

- (i) B- Blind
- (ii) PB- Partially Blind

**C Hearing impairment:**

- (i) D- Deaf
- (ii) PD- Partially Deaf

(DELETE THE CATEGORY WHICHEVER IS NOTAPPLICABLE)

This condition is progressive/non-progressive/likely to improve/not likely to improve. Re-assessment of this case is not recommended/is recommended after a period of \_\_\_\_years\_months.\*

Percentage of disability in his/her case is.....percent.

Sh./Smt./Kum.....meets the following physical requirements for discharge of his/her duties:-

- (i) F-can perform work by manipulating with fingers. Yes /No
- (ii) PP-can perform work by pulling and pushing Yes /No
- (iii) L-can perform work by lifting Yes /No
- (iv) KC-perform work by kneeling and crouching Yes /No
- (v) B-can perform work by bending Yes /No
- (vi) S-can perform work by sitting Yes /No
- (vii) ST-can perform work by standing Yes /No
- (viii) W-can perform work by walking Yes /No
- (ix) SE-can perform work by seeing. Yes /No
- (x) H-can perform work by hearing/speaking Yes /No
- (xi) RW-can perform work by reading and writing. Yes /No

Signature and seal of the Medical Authority.

**SELF-DECLARATION**

I, Dr. \_\_\_\_\_ S/o D/o \_\_\_\_\_

appearing for written test for the post of Junior Resident (NPG-Dentistry) on tenure Basis (for a period of 12 months) for JIPMER, Puducherry held on \_\_\_\_\_ do hereby declare that I have not been worked as Junior Resident (NPG-Dentistry) for a period of one year on Regular/ Ad-hoc / Contract Basis in any of the Central / State / semi Govt. / Autonomous Organizations.

I have worked as Junior Resident (NPG-Dentistry) on Regular / Ad-hoc / Contract Basis for the period from \_\_\_\_\_ to \_\_\_\_\_ at \_\_\_\_\_ which is a Central / State / Semi Govt. / Autonomous Organizations.

I understand that if the said information as given by me is proved to be false, I will liable to be terminated from the services.

Signature : \_\_\_\_\_

Name : \_\_\_\_\_

**CERTIFICATE / NO OBJECTION BY THE PRESENT EMPLOYER**

(In case candidate is in Govt. / Semi Govt. / PSU/ Autonomous Body service etc.)

No. \_\_\_\_\_

Date \_\_\_\_\_

Certified that Dr. \_\_\_\_\_ holds a post of \_\_\_\_\_ for the period from \_\_\_\_\_ to \_\_\_\_\_ on regular/adhoc/contract basis in this Department/Office/Institution/Organization. The Institute has no objection to his/her application being considered for the post of JUNIOR RESIDENT (NPG-Dentistry) at JIPMER, Puducherry on tenure basis (for a period of 12 months). In the event of his / her selection to the post, he / she will be relieved from the duty to take up the post of \_\_\_\_\_ in JIPMER, Puducherry.

Signature \_\_\_\_\_

Designation \_\_\_\_\_

(Seal with Name & Designation)

Office Stamp