### Office Of the Principal. Autonomous state Medical College Kanpur Dehat U.P

### Email 1- asmcknpdehat2023@gmail.com, Email 2- info@asmckanpurdehat.in

Website - www.asmckanpurdehat.in

Date -28/03/2023:

### Letter no- ASMC/KANPURDEHAT/ADVERT./2023/232

### -: Advertisement :-

Applications are invited on the prescribed format for the regular posts of Professors, Associate Professors and Assistant Professors of Autonomous State Medical College Kanpur Dehat Uttar Pradesh. The tentative numbers of the posts are given below:

s.		Pre	ofessor	Associa	te Professor	Assistant Professor		
N. `	Name of Specialty	No.of Posts	Category	No.of Posts	Category	No.of Posts	Category	
1	Orthopedies			01	SC			
2	Ophthalmology					01	SC	
3	Obstetrics and Gynecology	01	SC	01	UR	01	UR OBC	
4	Immuno Hematology and blood transfusion					01	UR	
5	Emergency Medicine	01	UR	01	OBC	01	SC	
6	Anatomy	01	0BC	01	UR	01	UR OBC	
7	Anesthesiology	01	UR	01	SC	01	UR	
8	Oto-rhino-Laryngology					01	OBC	
9	Community Medicine					01	EWS	
	Community Wedlenie			01	UR	01	SC	
10	General Medicine	01	SC	01	OBC	01	UR OBC	
						01	UR	
	General Surgery	01	UR	01	UR	01	SC	
11				0.1		01	UR	
				01	OBC	01	OBC	
12	Tuberculosis and Respiratory/Pulmonary Medicine			01	EWS			
13	Dermatology, Venereology and Leprosy			01	SC			
14	Dentistry			01	UR	01	UR	
15	Pediatrics			01	OBC			
16	Pathology			01	UR	01	OBC	
17	Pharmacology			01	SC			
18	Physiology	01	OBC	01	UR	01	EWS	
19	Forensic Medicine					01	SC UR	
20	Biochemistry	0.1	110			01	OBC	
		01	UR	01	OBC	01	UR	
21	Microbiology			01	UR			
22	Radiodiagnosis			01	OBC	01	SC	
23				01	EWS			
	Total		08		20		25	

#### -: Qualifications:-

Posts	Academic Qualification	Teaching & Research Experience
Professor	MD/MS/DNB in the	i. Associate Professor in the subject for three years in a
8 year post	concerned subject.	permitted/ recognized medical college/ institution.
PG .	7-	ii. Should have at least four Research publications (at least
experience		two as Associate Professor) [only original papers, meta-
•		analysis, systematic reviews, and case series that are
		published in journals indexed in Medline, PubMed, Central
		Science Citation Index, Science Citation Index, Expanded
		Embase, Scopus, Directory of Open Access Journals
		(DoAJ) will be considered].
		iii. Should have completed the basic course in Medical
		Education Technology from Institutions designated by
		NMC.
;		iv. Should have completed the Basic course in Biomedical
Associate	MD/MS/DNB in the	Research from Institutions designated by NMC.
Professor	concerned subject.	i. As Assistant Professor in the subject for four years in a
5 years post	a subject.	Permitted /recognized medical college/ institution.  ii. Should have at least two Research publications to the
PG		The state at least two Research publications tonly to
experience		original papers, meta-analysis, systematic reviews, and
		case series that are published in journals included in
		Medline, PubMed, Central Science Citation Index, Science Citation Index, Expanded Embase, Scopus, Directory of
		Open Access Journals (DoAJ) will be considered].
		iii. Should have completed the basic course in Medical
		Education Technology from Institutions designated by
		INIVIC.
		iv. Should have completed the basic course in Biomedical
Assistant	MD/MS/DNB in the	Research from Institutions designated by NIMC
Professor	concerned subject.	One year as sellior Resident in the concerned subject in a reserve
		permitted medical college after acquiring MD/MS Degree.

Note: - All qualifications subjected to latest NMC notification.

## Qualification for selection of Designated Assistant Professor

- A non-teaching Consultant or Specialist, possessing postgraduate medical degree, working for at least two years in the concerned specialty in a minimum 330 bedded non-teaching Government Hospital shall be eligible to be designated as Assistant Professor and be absorbed permanently, if that Hospital is being converted into a Government Medical College for imparting undergraduate medical education. The subsequent promotions to higher teaching designations would be as per these regulations. Provided further that this would only be a one time appointment of any faculty would be as per these regulations.
- Stand-alone Postgraduate medical institution: Consultants or specialists having the required postgraduate degree and experience of working in the concerned specialty /super-specialty department for a period of not less than 2 imparted as per section 9.3 of the Postgraduate Medical College, where postgraduate teaching is being equated as an Assistant Professor in the department concerned. This has to be confirmed by the affiliating University. The subsequent promotions to higher teaching designations would be as per these regulations.



- 1) Age: The candidate must have a minimum age of 26 years & a maximum of 65 years on the first day of July in 2) Pay-Scale:
  - i) Professor Academic Level 14, Initial Pay Rs. 1,44,200.00/-
  - ii) Associate Professor: Academic Level 13A, Initial Pay Rs. 1,31,400.00/-
  - iii) Assistant Professor: Academic Level 11, Initial Pay Rs. 68,900.00/-

The Pay/Allowances of the Professor, Associate Professor and Assistant Professor and designated Assistant Professor would be admissible as per State Government rules.

- 3) Application Fee: DD of Rs.500/- (Rs. Five Hundred only) payable in favour of "Principal, Autonomous State Medical College, Kanpur Dehat U.P."
- 4) No TA/DA is payable for attending the interview.
- 5) Number of posts may increase or decrease.
- 6) Advertisement full details and application form can be downloaded from www.asmckanpurdehat.in and from DGME Website dgme.up.gov.in college website complete Application form should reach to the office of Principal, Autonomous State Medical College, Kanpur Dehat U.P. only through speed post/Registered post latest by- 21.04.2023, 05:00 PM.
- 7) In complete Application form and form reach after specified date and time will not be accepted.
- 8) Reservation policy would be admissible as per the current rules and Government orders of Govt Of U.P.

Autonomous State Medical College, Kanply dehat

## MODEL COPY

# AUTONOMOUS STATE MEDICAL COLLEGE, ....

### Application Format

Advertisement Number and Date	•••••
Post(The Post for which the applic	eation is being made)
Note: - All information must be completed by the applicant.  1- Name of Applicant	1 11000
<ul><li>3- Father / Husband's Name (including Surname)</li><li>4- Present Address of Residence (including PIN code)</li></ul>	
Name of the City	
Name of the City	tion)
9- Applicant's Marital Status- Married / Unmarried	Other Backward Classes
12-Registration Number and Name of the Medical Council and I a- MBBS b- MD/ MS c- MCH/ DM d- Others	Date

<sup>13-</sup>Educational Qualifications: (Enclose attested photo copies of certificates and marks sheets)

No.	Name of the Examination	Institution / Board / University	Year	Subject	Marks Obtained / Max Marks	MBBS Total Marks / percentage	effort (attempts)
1	MBBS						
2	MD/MS						
3	DM/MCH						
4	Others						

## 14-Educational experience:-

No.	Designation	From	То	Duration	Name of the Institution
1	Professor				-
2	Associate Professor				
3	Asstt. Professor				2 1 1
4	S.R. / Tutor / Demonstrator				

(Attach experience certificate)

### 15-Research Publications:-

No.	Designation	Research Publications
1	Professor	
2	Associate Professor	
3	Asstt. Professor	
4	S.R. / Tutor / Demonstrator	

(Attach Photo Copy)

16	-If candidates	serving	in G	overnm	ent/	Quasi	Govern	ment	or I	Public	Sector	are	advis	ed to
	submit 'No O	bjection (	Certi	ficate' f	rom	their e	mployer	at the	e tim	e of ir	nterview	, fai	ling v	vhich
	their candidat	ure may i	not be	e consid	dered	l <b>.</b>								

17-L	ist of	fattached	l certificates a	as per	checklis	st	 

Place	
Date	Full name and Signature of the Applicant

### // Announcement //

1. I certify that the above information given by me is complete and true. In the event of	f
information being false, my application form / appointment letter can be cancelled.	

2. I certify that I have not been found guilty by any court of any offense of moral decimation nor is there any such case against me in any jurisdiction.

Place		
Date	Full Name and Signature of the Applican	L

# Checklist

Name of applicant:	
1. Demand Draft	
2. Self-Attested Photograph	,
3. Aadhar Card & Pan Card	
4. Category Certificate	
5. DOB Certificate /High School Certificates	
6. UG, PG Degree	
7. UG,PG Registration	
8. Experience Certificates	
9. Research Publications	
10. NOC if in Government Service	
Place:	C:
Date:	Signature of the applicant

