

MAHATMA GANDHI POSTGRADUATE INSTITUTE OF DENTAL SCIENCES GOVT. OF PUDUCHERRY INSTN. PONDICHERRY - 605 006

CIENCES

E-mails : mgdch.pon@nic.in,
mgpgids@gmail.com

Websites: https://mgpgi.py.gov.in
https://mgpgi.edu.in

Phone : 0413-2279601 - 2279606

Advt. No. 02/MGPGI/Estt./E1/2021-2022

EMPLOYMENT NOTIFICATION

Applications in the prescribed proforma as available on the websites **https://mgpgi.py.gov.in** and **https://mgpgi.edu.in** are invited from the eligible candidates, who are residents of Union Territory of Puducherry for engagement of 15 posts of Nursing Officers on contract basis in this Institution.

Consolidated Pay/Month: ₹ 20,000/-

Age Limit : Between 18 and 32 years

Educational and other qualification required

(a) A pass in Higher Secondary examination or its equivalent;

(b) Degree or Diploma in General Nursing and Midwifery / Psychiatric Nursing or its equivalent from a recognized institution;

and

(c) Registration as a Nurse and Midwifery equivalent in any State

Nursing Council in India.

Method of Selection

Based on the aggregate of the 50% of marked obtained in the Higher Secondary Examination or its equivalent and 50% of marks obtained in the B.Sc. (Nursing) Degree or Diploma in General Nursing & Midwifery / Psychiatric Nursing or its equivalent. A deduction of 5% of marks shall be made for every additional attempt. In addition to this, 1.5 marks for every completed year of seniority from the date of registration of the requisite technical qualification in the Employment Exchange shall be added subject to a maximum of 15 marks. Thus the qualifying marks shall be calculated to the maximum total marks of 115 (50 + 50 + 15).

Note:

- 1. The period of contract of employment is ONE year, which is liable to be extended to 3 years, subject to satisfactory performance and requirement.
- 2. Age and Experience will be reckoned as on the last date of the receipt of the applications.
- 3. Selected candidates shall report for duty immediately. **Extension of joining time strictly not permitted**.
- 4. Registration Fee:
 - A non refundable Registration fee of ₹ 500/- (₹ 250/- for SC/ST) by way of Demand Draft drawn in any of the Nationalised Banks in favour of the DEAN, Mahatma Gandhi Postgraduate Institute of Dental Sciences, payable at Puducherry must be enclosed alongwith the application form. Cheque / Postal Orders / Money Orders and Cash are not acceptable. Invalid demand drafts will entail disqualification of the application.
- 5. The candidate must ensure before applying that they fulfil the essential qualifications and requirements.
- 6. Qualification, Experience, age and other requirements must be invariably supported by relevant documents.
- 7. Applications which are incomplete or without required DD / testimonials / certificates etc. shall be rejected straightaway and no correspondence will be entertained in this regard.
- 8. Completed applications in all respects with photograph, self attested copies of certificates, mark lists, number of attempts in which the candidates passed the Degree / Diploma and other testimonials etc. should reach the "DEAN, MAHATMA GANDHI POSTGRADUATE INSTITUTE OF DENTAL SCIENCES, GORIMEDU, PUDUCHERRY 605 006" on or before 31.01.2022. The application should be sent in an envelope superscribed as "APPLICATION FOR THE POST OF NURSING OFFICERS". This Institution shall not be responsible for any postal delay.
- 9. Canvassing in any form by or on behalf of the candidates will disqualify his / her candidature.
- 10. The selected candidates must be prepared to serve in any region in this U.T.Puducherry.

(By Order of the Hon'ble Chief Minister / Chairman, MGPGI)



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APPLICATION FORM FOR CONTRACTUAL APPOINTMENT FOR THE POST OF NURSING OFFICERS IN MAHATMA GANDHI POSTGRADUATE INSTITUTE OF **DENTAL SCIENCES, PUDUCHERRY**

(Candidates are advised to read the employment notification carefully and then fill up the application in all respects. No column should be left blank. Incomplete application shall be rejected).

1.	(a) Name (in Block letter)	:	Affix a recent
	(b) Father's / Husband's Name	:	passport size
	(c) Permanent address	:	signed by the candidate
	(d) Address for correspondence	e : Mobile No.: Tel. No. : Fax No. :	
		E-mail <u>:</u>	
	PIN		
2.	Date of Birth :	3. Sex	
3.	Marital Status :		
4.	Nationality:		
5.	Whether Native/Resident of Puc (Proof should be enclosed)	lucherry :	
6.	Religion	:	
7.	Community	:	
8.	Registration Fee payment detail	s:	
Dem	and Draft No. :	Amount Rs.	
Date	:		
Nam	e of the Bank :		
Place	:		2/
			//

-2-Essential Educational Qualifications required for the post (Please enter from SSLC/Matriculation / Higher Secondary to Degree / Diploma) 6.

Sl. No.	Qualification	Name of the Board/University/Institution	Max Marks	Marks Obtained	No. of Attempts	Month & Year of Passing
1	2	3	4	5	6	7

7.	Registration details of State Nursing Counc	ril ·			
,.					
	a. Registration No. & Date	:			
	b. Registered in which State	:			
8.	a) Clinical Experience (in Hospital) (Experience certificate from the concerr employers must be enclosed)	: ned			
	b) Emoluments in the present position	:			
9.	Employment Registration Details	:			
	(a) Registration No. :				
	(b) Date of Registration : (i) SSLO	C	:		
	(ii) HSC	1	:		
	(iii) Degr	ree / Diplor	na :		
	(c) Date of Next Renewal:				
10.	Any other information	:			
	DECLARA	<u>ATION</u>			
cor	reby solemnly declare that the information remplete to the best of my knowledge and be needed or suppressed and if there has been suppressed and if there has been suppressed.	elief and	is application that no mate	rial inform	ation has been
	terminated, if selected. ace :				
Da	ate :	<u>.</u>	Signature of t	he applicani	<u>.</u>