



Fax : 0385-2414625
Phone : 0385- 2414539
0385-2414629
e-mail : rims@rims.edu.in
website : www.rims.edu.in

REGIONAL INSTITUTE OF MEDICAL SCIENCES
(An autonomous Institute under Ministry of Health & Family Welfare, Government of India)
LAMPHELPAT, IMPHAL - 795004 : MANIPUR

NOTICE

Imphal, the 17th July, 2021

No. B/561/2021-SR/RIMS: 19093 A walk-in-interview for selection of suitable persons for the posts of Senior Residents in the following departments of RIMS, Imphal will be held on 27th July, 2021 at 10.00 a.m. in the Conference Room of Jubilee Hall, RIMS, Imphal. The appointment is purely on Tenure basis for a limited period of 3 (three) years. Interested candidates having the following qualification, experience and within the upper age limit may apply in the prescribed format (given in the website) and submit scan copy of the application along with the copies of educational qualification, experience etc., to email ID: rimsimphal18@gmail.com by 4.00 p.m. of 26th July, 2021. No hard copy will be entertained. The candidates have to produce their original certificates, testimonials before the Selection Board. Candidate associated with the Health & FW, Govt. of Manipur have to enclose "No Objection Certificate (NOC)" from the concerned department failing which their candidature may be cancel without further intimation to the concerned candidate. Department/Unit wise vacant posts of Sr. Resident are as follows:

| Sl. No. | Name of post | Scale of Pay | No. of post | Qualification and experience |
|---------|----------------------------------|-----------------|-------------|---|
| 1 | Sr. Resident (Medicine) | P-B3 Level - 10 | 5 | i. Postgraduate degree (MD/MS/DNB) in the respective subject from the institute recognized by MCI. ii. Candidate must be registered with the Manipur Medical Council/Medical Council of India. |
| 2 | Sr. Resident (Surgery) | - do - | 3 | |
| 3 | Sr. Resident (Forensic Medicine) | - do - | 1 | |
| 4 | Sr. Resident (Pharmacology) | -do- | 1 | |
| 5 | Sr. Resident (Anatomy) | -do- | 1 | |

*Vacancy may increase or decrease. The number of vacant posts indicated above are provisional and subject to the change according to vacancies without any notice.

The upper age limit is 45 years, relaxable as per Government of India norms.

(K. Doungel)

Deputy Director (Admn.),
Regional Institute of Medical Sciences,
Imphal

Copy to:

1. P.S. to Director – for kind information to the Director, RIMS, Imphal.
2. The Medical Superintendent. i/c, RIMS Hospital, Imphal.
3. The Director, DDK/AIR, Imphal.
4. The HOD of Medicine/Surgery/Forensic Medicine/Pharmacology, RIMS, Imphal.
5. The C.A.O/F.A., RIMS, Imphal.
6. The Caretaker, Jubilee Hall, RIMS, Imphal.
7. System Administrator, RIMS, Imphal – for uploading the above Advertisement in the RIMS website.
8. Notice Board.

PRESCRIBED FORMAT FOR THE POST OF

SENIOR RESIDENT OF _____, RIMS, IMPHAL

1. Full name in Block letters : _____
2. Father's/Husband Name : _____
3. Date of birth : _____
4. Age (as on the last date of submission of application): _____
5. Gender & Marital Status : _____
6. Permanent address in full : _____
7. Present address with : _____
postal code in full _____
8. Telephone/Mobile No. : _____
9. E-mail ID in Block letters : _____
10. Nationality (State whether by birth or by domicile) : _____

Affix recent
Passport size
photograph

11. Do you belong to Schedule Caste/Schedule Tribe/OBC category?:
(if yes please indicate and enclose a copy of the certificate)

12. Details of Examination passed:

| Examination | Name of School/College with address | Name of Board/Council/ University | Month & Year of passing | Division/ Class obtained | % of marks obtained |
|--------------------------|-------------------------------------|-----------------------------------|-------------------------|--------------------------|---------------------|
| 10+2/P.U.C. | | | | | |
| MBBS | | | | | |
| M.D./M.S. with specialty | | | | | |
| DNB | | | | | |

13.

DECLARATION

I, Shri/Shrimati/Kumari _____

declare as under:

- i) That I am unmarried/a widower/a widow.
- ii) That I am married and have only one spouse living.
- iii) That I have entered into or contracted a marriage with a person having a spouse living. Application for grant of exemption is enclosed..
- iv) That I have entered into and contracted a marriage with another person during the lifetime of my spouse. Application for grant of exemption is enclosed.

AND

- v) **That I hereby declare that the entries made in format are true and correct to the best of my knowledge and belief. In the event of any information being found false/incorrect my candidature/services are liable to be terminated without any notice.**

Station:

Date:

Signature:

Full name of the applicant:

List of documents enclosed:

- 1.
- 2.
- 3.
- 4.

NO OBJECTION CERTIFICATE

(For candidates in Government service)

Certified that _____ is working as
_____ on regular / contract basis in the (PB+GP) _____
in the pay of P.B. Rs. _____ + G.P. Rs. _____.

The Institute /College has no objection to his/her applying for the post of
_____, RIMS, Imphal.

Further, certified that in case if he/she is appointed, he/she will be released from the
service of this Institute/College.

Date: _____

Signature
Head of the Institute/College

Name: _____

Designation: _____

Institute/College: _____

Seal