

**Office of the CEO & Dean**  
**Shyam Shah Medical College, Rewa (M.P.)**

No...../Estt./Gazz/M.C./Adv./2022

Rewa, Dated.....11/11/22

25501-

**ROLLING ADVERTISEMENT**

Under the rules of the " Madhya Pradesh Super Speciality Hospital Chikitsa Shikshak Adarsh Seva Niyam-2018 and Madhya Pradesh Swashasi Chikitsa Mahavidhyalaya Chikitsakiya Seva Adarsh Niyam-2018", Super Speciality Hospital, Rewa associated with S.S. Medical College Rewa, invites applications for various vacant posts (with backlog) of teaching/medical cadre through direct recruitment. The details are as follows :

S. No	Subject	Professor				Associate Professor				Assistant Professor			
		UR	OBC	ST	SC	UR	OBC	ST	SC	UR	OBC	ST	SC
1	2	3	4	5	6	7	8	9	10	11	12	13	14
1	Anaesthesia	-	-	-	-	-	-	-	-	-	1	-	-
2	Anaesthesia (CVTS)	1	-	-	-	1	-	-	-	1	1	-	-
3	Anaesthesia (Neurosurgery)	-	-	-	-	1	-	-	-	-	1	-	-
4	Neurology	1	1	1	-	1	1	1	-	3(1F)	1	1	1
5	Neurosurgery	1	1	1	-	-	1	1	-	-	1	1	1
6	Electrophysiology Cardiology	1	-	-	-	-	-	-	-	-	-	-	-
7	Paediatric Cardiology	1	-	-	-	1	-	-	-	1	1	-	-
8	Interventional Cardiology	1	-	-	-	-	-	-	-	-	-	-	-
9	Nephrology	1	1	1	-	1	1	1	-	2	1	1	1
10	Urology	1	1	1	-	-	1	1	-	1	1	1	-
11	Neonatology	1	1	1	-	1	1	1	-	3(1F)	1	1	1
12	Cardiac Surgery	1	1	1	-	-	1	1	-	2	1	1	1
13	Radiodiagnosis	1	-	-	-	1	-	-	-	1	1	-	-
<b>Total</b>		<b>11</b>	<b>6</b>	<b>6</b>	<b>-</b>	<b>7</b>	<b>6</b>	<b>6</b>	<b>-</b>	<b>14</b>	<b>11</b>	<b>6</b>	<b>5</b>
		<b>UR</b>	<b>OBC</b>	<b>ST</b>	<b>SC</b>								
General Duty Medical Officer (GDMO)		-	-	1	-								

- Application fee as DD in favour of " CEO & Dean SSMC Rewa" payable at Rewa for UR candidates is Rs.1000/- and Rs. 750/- for reserved category candidates.
- Interview will be conducted on every Fourth Thursday of the Month. In case of Govt. holiday, interview will be conducted on next working day.
- Interview will be subject to availability of atleast 03 applications on cummulative basis.
- Information of regarding interview dates shall be communicated 07 days prior to the candidates.
- Vacany position will be updated on 5th day of every month. Number of posts may be increased or decreased. This advertisement will be valid upto 31.12.2022.

**For details of advertisement, application form and selection process keep in touch with [www.ssmcrewa.com](http://www.ssmcrewa.com)**

*[Signature]*  
CEO & Dean

S.S. Medical College  
Rewa (M.P.)

*[Signature]*  
27/10/22

सुपर स्पेशलिटी हॉस्पिटल रीवा में प्राध्यापक/सह-प्राध्यापक/सहायक प्राध्यापक के पद पर  
चयन हेतु निर्धारित मापदण्ड

अति-विशेषज्ञता विषय के प्राध्यापक/सह-प्राध्यापक/सहायक प्राध्यापक पद हेतु :-

1. एम.बी.बी.एस. में प्राप्तांको के प्रतिशत का 10 प्रतिशत, अधिकतम 10 अंक (प्रति अतिरिक्त प्रयास 2 अंक घटाया जावेगा)।
2. एम.सी.आई. द्वारा मान्यता/अनुमति प्राप्त चिकित्सा महाविद्यालय से पी.जी. डिग्री-एम.डी/एम.एस./डी.एन.बी. (एम.डी./एम.एस. के समतुल्य माने गये) हेतु 15 अंक (प्रति अतिरिक्त प्रयास 5 अंक घटाया जावेगा)।
3. एम.सी.आई. द्वारा मान्यता/अनुमति प्राप्त चिकित्सा महाविद्यालय से सुपर स्पेशलिटी डिग्री-डीएम/एमसीएच/डी.एन.बी. अतिविशेषज्ञता हेतु अधिकतम 30 अंक (प्रति अतिरिक्त प्रयास 5 अंक घटाया जावेगा)।
4. डी.एम./एम.सी.एच./डी.एन.बी. अतिविशेषज्ञता डिग्री उपरांत आवेदित पद हेतु निर्धारित न्यूनतम अनुभव के अतिरिक्त एम.सी.आई./एन.एम.सी. द्वारा मान्यता प्राप्त चिकित्सा महाविद्यालय से प्राप्त अनुभव हेतु प्रति एक पूर्ण वर्ष के लिये 2 अंक, अधिकतम 10 अंक।
5. संबंधित विषय में न्यूनतम 6 माह के फेलोशिप/अन्य योग्यता हेतु 5 अंक।
6. सुपर स्पेशलिटी विषय के प्रशिक्षण अवधि अथवा उसके पश्चात् संबंधित पद हेतु एम.सी.आई. के निर्धारित न्यूनतम मापदण्ड के अतिरिक्त प्रति पब्लिकेशन 2 अंक, अधिकतम 10 अंक।
7. साक्षात्कार हेतु 20 अंक।

*S. Shrivastava*  
12/07/22

मुख्य कार्यपालन अधिकारी एवं अधिष्ठाता  
श्याम शाह चिकित्सा महाविद्यालय, रीवा (म.प्र.)

*R. Shrivastava*  
12/07/22

# APPLICATION FORM

Affix your  
recent  
passport  
size  
photograph

1. Advertisement no. and Sl. No. of the Post: .....
2. Post Applied for: .....Category.....
3. Name (in block letter) : .....
4. Father's Name : .....
5. Candidate's Category (UR/SC/ST/OBC/EWS/Physically Handicapped) : .....
6. Date & Place of Birth (attach proof) : .....
7. Nationality : .....
8. Marital Status : .....
9. Date of Marriage : .....
10. Address for Correspondence (with Phone no and Email ID):  
.....  
.....  
.....
11. Permanent Address :  
.....  
.....  
.....
12. Adhar card No. : .....
13. Age as on 01-07-2022 :                      Year \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_

14. Medical Council Registration :

Degree	Name of Medical Council	Registration Number	Date of Registration
MBBS			
MD/MS			
MCH/DM			

15. Qualifications : (Self attested photocopies certificates & marksheets)

Exam Passed	Board/ University	Year of Passing	Subject	Marks obtained/ Total Marks	Percentage	Attempts (if any)

16. Experience (if any):

S.No.	Post	Institution	From	To	Total Experience
1	Professor				
2	Associate Professor				
3	Assistant Professor				
4	Tutor				
5	Present work/Designation _____				

17. Publications :

S.No.	Post	Research Publications
1	Professor	
2	Associate Professor	
3	Assistant Professor	
4	Tutor	

18. Any other relevant information :

Date : .....

Place : .....

Name & Signature

**Declaration**

I Dr. .... hereby certify that the fore-going information is correct to the best of my knowledge and belief. I have not suppressed any material fact or factual information in the above statement. In case, I have given wrong information or suppressed any material fact or factual information, then my service are liable to be terminated without giving any notice or reason thereof.

I have not been indulge in any criminal activities and no judicial cases are pending with me.

Date : .....

Place : .....

Name & Signature