




Subject: Filling up of Six vacant posts of Medical Social Welfare Officer in Pay Matrix 6 (Rs. 35400-112400/-) by deputation basis.

Applications are invited to fill up the 06 posts of Medical Social Welfare Officer (General Central Service, Group 'B', Non- Gazetted, Non-Ministerial) in the Lady Hardinge Medical College & SSK Hospital, New Delhi on deputation basis from suitable candidates. Eligible Candidates who fulfill the eligibility criteria, as mentioned below may apply:-

1.	Name of Post	Medical Social Welfare Officer (General Central Service, Group 'B', Non- Gazetted, Non-Ministerial)
2.	Pay Matrix Level	Level -6 (Rs. 35400- Rs. 112400)
3.	Eligibility	<p>Officers of the Central Government or State Governments or Union territories -</p> <p>(a) (i) holding analogous post on a regular basis in the parent cadre or Department ;</p> <p>or</p> <p>(ii) with six years' service in the grade rendered after appointment thereto on a regular basis in level- 5 in the pay matrix (Rs 29200 - 92300) or equivalent in the parent cadre or Department and</p> <p>(b) Possessing the educational qualifications and experience as mentioned below:-</p> <p>(a) (i) Bachelor Degree in Social Work or Sociology from a recognized University or institute or Degree in any discipline with at least one year diploma in Social Work from a recognized University or institute; and</p> <p>(ii) Two years' experience in the field of Medical Social work in Government recognized hospital or institution,</p> <p>or</p> <p>(b) (i) Master's Degree in Social Work or Sociology from a recognized University or institute; and</p> <p>(ii) One year experience in the field of medical social work in Government recognized hospital or institution.</p> <p>Note 1: The Period of deputation including period of deputation in another Ex-cadre post held immediately preceding this appointment in the same or some other organisation or department of the Central Government shall ordinarily not exceed three years.</p> <p>Note 2: The maximum age-limit for appointment by deputation</p>

	shall be not exceeding fifty-six years as on the closing date of receipt of applications.
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3. Interested applicants may send their applications through Proper Channel in the enclosed **Proforma** in duplicate to the undersigned within a period of one month from the date of publication of this advertisement **in the Employment News. Applications received after the last date or otherwise incomplete are not likely to consider.**
4. The pay of the selected officer will be regulated in accordance with the Department of Personnel & Training OM No. 2/29/92-Estt. (Pay-II) dated 05.01.1994 and OM No. 2/8/97-Estt.(Pay-II) dated 11.03.1998 as amended from time to time.
5. The following papers/documents may also please be sent along with nomination.
- Statement of Bio-data in the prescribed **Proforma**(as per annexure-I) in the duplicate duly signed and forwarded through proper channel.
 - Attested copies of the APAR dossiers for the last five years (attested on each page) by an Officer not below the rank of Under Secretary to the Govt. Of India.
 - Vigilance Clearance Certificate.
 - Integrity Certificate.
 - A statement of major/minor penalty, if any, imposed on the officer during the last 10 years.
 - Cadre clearance certificate.
6. The last date of submission of applications through proper channel for deputation to the said post will be one month from the date of publication of the advertisement in **Employment News.**
7. 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.


Deputy Director (Admn.)
LHMC & SSKH, New Delhi.

Kanchan



BIO DATA PROFORMA
APPLICATION FOR THE POST OF MEDICAL SOCIAL WELFARE OFFICER

1. Name (In Block Letters):-							
2. Address (In Block Letters):-							
3. Date of Birth (in Christian era):-	D	D	M	M	Y	Y	Y
4. Date of retirement under Central Govt. rules							
5. Educational Qualifications	Educational Qualifications Possessed by the Officer:						
6. Experience							
Exp. Required				Exp. Possessed by the Officer			
i) Essential	1)						
	2)						
	3)						
7. Please state clearly whether in the light of Entries made by you above, you meet the Requirements of the post.							

8. Details of employment, in chronological order, enclose a separate sheet, duly authenticate by your signature, if the space below is insufficient:-

Office/Instt./Organization	Post Held	From	To	Scale of Pay	Name of duties & basic pay
1.					
2.					
3.					
4.					

9. Nature of present employment (Ad-hoc/temp./permanent/quasi-permanent)

10. In case present employment held on deputation please state: -

a) The date of initial appointment: -

b) Period of appointment on deputation: -

c) Name of the parent office/organization: -

11. Additional details about present employment:

12. Are you in a revised scale of pay? If yes, the date from which date the revision took place and also indicate the pre-revised scale.

13. Total emolument per month drawn now:

14. Additional information, if any, which would you like to mention for your suitability for the post, enclosed a separate sheet, if the space is insufficient.

15. Whether belongs to SC/ST: -

16. Remarks: -

Date: -

Signature of Candidate

Place: -

Name:- _____
Address:- _____
Tel. No:- _____