



Date : 02.03.2016

### **Invitation for Expression Of Interest (EOI)**

Indian Institute of Information Technology, Design and Manufacturing, Jabalpur is an Institute of National Importance established in year 2005 by the Ministry of HRD, Government of India. The Institute invites applications from interested and eligible candidates to be hired as consultants in the following fields:-

- i) Medicine
- ii) Paediatrics
- iii) Gynaecology
- iv) Orthopaedics
- v) Dermatologist
- vi) ENT
- vii) General Physician (Resident Doctor for round the clock duty)
- viii) Psychology (Counsellor)
- ix) Yoga
- x) Ophthalmologist
- xi) Dentist

These consultants may be hired on full time/part time basis. The remuneration will be decided on the basis of qualification and experience of the person.

Scope of Work : - Institute is having around 1200 Students and around 120 regular employees. All students and some employees are residing within the campus. The requisite qualification and experience is given in the table below :-

S.N.	Name of Post	Requisite Qualification	Experience
1	Specialist (Medicine, Paediatrics, Gynaecology, Dermatology, Orthopaedics, ENT, Ophthalmologist)	MBBS AND Medical qualification included in the first or the second schedule or part-II of the third schedule (other than licentiate qualifications) to the Indian Medical Council act, 1956. holders of educational qualifications included in part-II of the third schedule should fulfill the condition stipulated in section 18(3) of the Indian medical council act, 1956	Five Years professional experience after Post-Graduation

		<u>AND</u> Completion of Compulsory Rotation in internship <u>AND</u> Post-Graduation in the relevant field	
2	General Physician	MBBS <u>AND</u> Medical qualification included in the first or the second schedule or part-II of the third schedule (other than licentiate qualifications) to the Indian Medical Council act, 1956. holders of educational qualifications included in part-II of the third schedule should fulfill the condition stipulated in section 18(3) of the Indian medical council act, 1956 <u>AND</u> Completion of Compulsory Rotation in internship	Five Years professional experience
3	Psychological Counsellor	A full time regular MA (Psychology) from a recognized University <u>OR</u> Degree in Psychology from a recognized University <u>OR</u> Any degree with full time regular one year diploma in Psychology (after degree) from a recognized University or an institute	Two Years professional experience
4	Yoga	A full time regular MA (Yoga) from a recognized University <u>OR</u> Degree in Yoga from a recognized University <u>OR</u> Any degree with full time regular one year diploma in Yoga (after degree) from a recognized University or an institute	Two Years professional experience
5	Dentist	BDS <u>AND</u> Completion of Compulsory Rotation in internship	Five Years professional experience

Interested Candidate may submit their application in the prescribed proforma by 28.03.2016.

The Registrar,  
PDPM-Indian Institute of Information Technology, Jabalpur,  
Dumna Airport Road, Post- Khamaria, Jabalpur (M.P.) 482005

**Director**

**PDPM**  
**INDIAN INSTITUTE OF INFORMATION TECHNOLOGY, DESIGN AND MANUFACTURING,**  
**JABALPUR**

**Application Form for Medical Consultant**

**A: Personal Details**

1.	Specialisation (Major/Minor)								
2.	Gender (mark ✓)	<b>Male</b>			<b>Female</b>				
3.	Marital Status (mark ✓)	<b>Married</b>			<b>Single</b>				
4.	Name in Full Underline Surname								
5.	Father's Name								
6.	Address For Correspondences								
7.	Permanent Address (if different from above)								
8.	Email ID								
9.	Mobile								
10.	Phone No.								
11.	Date of Birth	D	D	M	M	Y	Y	Y	Y
12.	Nationality								

**B: Academic Details:**

13. Academic Records starting with high school:

Degree/ Exam	University/ Board/ College	Year	Percentage of marks	Division	Rank(if applicable)
Graduation					
Post- Graduation					
Any other additional					

14.	Total Experience in Year(s) Month (s)(Post Ph.D.)	
15.	Membership of Professional Bodies	
15. (i)	Name of Body	
15. (ii)	Name of Body	
15. (iii)	Name of Body	

16. Any other relevant information you may like to furnish **(use separate sheet if required)**

**Declaration**

I hereby declare that I have carefully read and understood the instructions and particulars supplied to me, and that all entries in this form as well as in the attached sheet(s) are true to the best of my knowledge and belief. I also declare that I have not wilfully suppressed any information. Further if any of the above information found wrong/ incorrect, my candidature will be treated as cancelled at any time. There are ..... enclosures with a total of ..... pages attached along with this form.

Date:  
Place:

Signature of Applicant  
Name of Applicant