

Government of India  
BHABHA ATOMIC RESEARCH CENTRE  
[Medical Division]

BARC Hospital,  
Anushaktinagar,  
Mumbai – 400094

**Appointment of Part-time Consultants in the Specialities of General Medicine /  
Orthopaedics/Rheumatology in B.A.R.C. Hospital**

BARC Hospital would like to appoint Part-time Consultants as per the details given below:

Speciality	No. of posts	No. of Visiting hours
General Medicine	01	3 hours each on two days in a week
Orthopaedics	02	3 hours each on three days in a week
Rheumatology	01	3 hours each on 2 days in a month

Qualification and Experience : M.D./M.S./DNB in concerned Speciality with a minimum 5 years experience after M.D./ MS/DNB

Age : Not more than 65 years as on 01.11.2013

Honararium : Rs.598/- per hour Plus incidental expenses of Rs.300/- per visit Subject to maximum of Rs.2,400/- per month.  
They will also be covered by CHSS facility for Self.

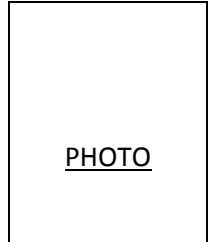
Work Details : Part-time Consultants in all the above specialities will have to attend the Patients coming to the speciality OPD only by appointment. They have also to enter the patient details etc. in Hospital Information Management Systems on their own.

Visiting hours/days referred to above are subject to change as per the requirement of the Hospital.

The Selection of Doctors will be made by Standing Selection Committee for an equivalent regular grade of Scientific Officer/Engineer grade `E`.

Applications in the prescribed format may be forwarded to Administrative Officer-III, Medical Division, BARC Hospital, Anushaktinagar, Mumbai – 400094 on or before 20<sup>th</sup> December, 2013.

# PROFORMA OF APPLICATION



APPLICATION FOR THE POST OF : \_\_\_\_\_

1. Name in full beginning with Surname (in block letters) : \_\_\_\_\_
2. Nationality : \_\_\_\_\_
3. Date of Birth (In Christian era) : \_\_\_\_\_
4. Address in block letters for correspondence with PIN code : \_\_\_\_\_  
: \_\_\_\_\_
- Telephone/Mobile No. : \_\_\_\_\_
- Email ID : \_\_\_\_\_
5. Educational and Professional Qualification :-

Sr.No.	Examina- tion Passed	University/Board/ Institution	Year of Passing	Subjects	Class & Percen- tage of marks

6. Experience (Teaching/Clinical etc.)

Name & Address of employer/Institution	Post held with Pay	Whether Central/State Govt./P.S.U.	Period of Service		Permant or Tempo- rary	Reason for leaving
			From	To		

7. Area of Specialisation: \_\_\_\_\_
8. Any other information you may wish to add: \_\_\_\_\_  
\_\_\_\_\_

Encl: Attested copies of Educational Qualification,  
Experience & Valid Registration

Signature: \_\_\_\_\_  
Date: \_\_\_\_\_