

# King George's Medical University Office of the Medical Superintendent,

Gandhi Memorial & Associated Hospitals, UP, Lucknow-226003

Ref. No. 26937 /SR/JR/2025

Dated: ....../2025

## Short Term Recruitment Non PG Junior Resident Through Walk-in-interview Walk-in-interview on 4<sup>th</sup> October, 2025

Applications are invited for vacant post of Junior Resident (Non PG Junior Resident) in the following department The details are as below:-

**Date of Interview** 

4th October, 2025

Reporting Time

1:30 P.M.

Walk-in-interview start

02:00 P.M.

Venue

Committee Hall,

Medical Superintendent Office, G.M. & A.H., King George's Medical University, Lucknow

### Details of available seats (Seat Matrix)

### Non PG Junior Resident:

| SI. | Name of Department         | Vacant seat category |      |    |    |  | Total | Qualification   |  |
|-----|----------------------------|----------------------|------|----|----|--|-------|---|--|
| No. |                            | UR                   | OBC  | SC | ST | EWS  |       |   |  |
| 1   | Cardiology                 | 112                  | 01   |    | 7  | The same of the sa | 01    | M.B.B.S./B.D.S and Additional -Qualification: M.D. (Hospital Administration)/ |  |
| 2   | Hospital<br>Administration |                      | - 01 |    |    | X  | 01    |   |  |
|     |                            |                      | M    |    |    |  |       | M.H.A.  |  |

> These seats may vary as per further DEME UP, Lucknow adjustment under compulsory Govt. Service Bond vide G.O. No. 950/71-2-82/2017 dt. 07th March, 2018.

### General Information:

- 1. Number of posts advertised may increase of decrease at the time of interview.
- 2. The candidates should have passed MBBS/BDS (including completion of Internship) and M.D. (Hospital Administration)/M.H.A. recognized by MCI/NMC.
- 3. Age as per NMC rules.
- 4. Pay and allowances as per University rules.
- 5. No T.A./ D.A. will be given for attending interview.
- 6. In care of reserve category candidate, caste certificate from competent authority issued last 6 month.
- 7. Vice Chancellor reserves the absolute discretion to cancel the advertisement in part or whole, without assigning any reason.
- 8. Walk-in-interview fee is Rs. 3,000/- for Unreserved (UR) & OBC candidate and Rs. 2,000/- for SC & ST candidate, applicants will be deposited as below details: (Bring one set Xerox copies of all relevant certificate and testimonials and originals for verification at the time of interview.

| Name of Bank & Branch | Indian Bank, KGMU, Lucknow |
|-----------------------|----------------------------|
| Account Number        | 20229846433                |
| IFSC code             | IDIB000K656                |
| Account Name          | University Income Fund     |

9. Last date of submitting of application is 3rd October, 2025.

10. Candidate should download the application form attached herewith & available on KGMU website and submit duly filled up along with self certified copy of the document latest by 3rd October, 2025 in the office of the Medical Superintendent.

Medical Superintendent, GM & Associated Hospitals, KGMU, Lucknow.

### Distributions:

- 1. The Registrar, KGMU, Lucknow.
- 2. The Finance Officer, KGMU, Lucknow.
- 3. The Chief Medical Superintendent, GM & AH, KGMU, Lucknow
- 4. Conderned HOD, KGMU, Lucknow
- 5. Faculty In-charge, IT Cell, KGMU, Lucknow with the request to upload above advertisement notice on KGMU website (Website@kgmcindia.edu)



# King George's Medical University Office of the Medical Superintendent, Gandhi Memorial & Associated Hospitals, UP, Lucknow-226003

# Application form for Junior Resident (Non PG JR) Walk-in-interview

| 1.  | Name of Department      | Choice for Interview   |                      |  |  |  |  |
|---|-------------------------|--|----------------------|--|--|--|--|
| 2.  | Name of candidate :     |  |                      |  |  |  |  |
| 3.  | Date of Birth (as per H | igh School certificate)  | Fixed your           |  |  |  |  |
|   | A 700 ·                 | vrs Months days  | recent<br>Photograph |  |  |  |  |
| 5.  | Sex :                   |  | 1 Hotograp           |  |  |  |  |
| 6.  | Catagory (Con/EWS/      | ORC/SC/ST/PH)  |                      |  |  |  |  |
| 7.  | Name of College (MBI    | 3S/BDS) :  |                      |  |  |  |  |
| 8.  | Entry year in MRRS/R    | DS .   | ,                    |  |  |  |  |
| 9.  | MBBS/BDS completio      | n year :   |                      |  |  |  |  |
| 10.   | MBBS/BDS Passing o      | ut certificate/ Degree   |                      |  |  |  |  |
| 11. MCI/ DCI-Recognition statues of College |                         |  |                      |  |  |  |  |
| 12  | Total Marks of MRRS/    | RDS ·  |                      |  |  |  |  |
| 13.   | Total percentage of ME  | BBS/ BDS :   |                      |  |  |  |  |
| 14  | MRRS/RDS attempt ce     | ertificate   |                      |  |  |  |  |
| 15.   | Hospital/ College/ Univ | versity name of Internship completion                          |                      |  |  |  |  |
| 16.   | Period of Internship    | :  |                      |  |  |  |  |
| 17.   | MBBS/ BDS Award &       | Medal (if any)   |                      |  |  |  |  |
| 18.   | Any other Academic Ex   | xperience/ Paper Published/ Conference attended etc. (if any). |                      |  |  |  |  |
|   |                         |  |                      |  |  |  |  |
| 19.   | Correspondence addres   | s of applicant   |                      |  |  |  |  |
|   | :                       | pplicant   |                      |  |  |  |  |
|   | Mobile No.              | :  |                      |  |  |  |  |
| 22.   | PAN No.                 |  |                      |  |  |  |  |
| 23.   | Aadhar No.              | :  |                      |  |  |  |  |
| 24.   | E mail ID               | :  |                      |  |  |  |  |
|   |                         |  |                      |  |  |  |  |

### **Declaration**

I, hereby declare that all statements made in the application are true, complete and correct to the best of my knowledge and belief. I, solemnly that if any material fact has been suppressed by me, my candidature shall stand immediately cancelled without any notice. In this matter decision of the admitting University shall be final and binding on me.

### Signature of the candidate

### Documents to be attached with the application form:

- Self-certificate copy of all relevant documents.
- Matriculation certificate/ age proof or any authentic age proof certificate.
- MBBS / BDS degree or pass certificate & MCI/State Medical registration proof.
- Certificate/ Proof of MBBS/ BDS degree's recognition by MCI.
- In care of reserve category candidate, caste certificate form competent authority issued within last 6 months of UP Govt.