

Govt. of NCT of Delhi

Contact No. 011-23233884, 23235211, Ext. No. 1155, 1156

Maulana Azad Institute of Dental Sciences

"M.A.I.D.S. Complex, B.S. Zafar Marg, New Delhi – 110002"

NOTICE

Subject: Recruitment on "<u>Contract Basis</u>" for the post of Research Associate for the Project entitled "A Randomized Controlled Clinical Trial to evaluate the Efficacy and Safety of Triphala Rasayana and Haridradi Taila Gandusha in Chemo /Radiotherapy induced Oral Mucositis in Oral Carcinoma." (Under AYURGAN Scheme, Research and Innovation in AYUSH, Ministry of AYUSH, Government of India) at MAIDS.

Opening date of receipt of application	11-10-2024 (FRIDAY)		
Closing date of receipt of applications	25-10-2024 (FRIDAY) upto 4PM		

Applications are invited for recruitment of Research Associate on contractual basis for the above said Project sanctioned under Ministry of AYUSH, Government of India.

Eligible candidates may submit their duly filled application form, Brief CV (limited to 2-3 pages) & passport size photograph along with relevant documents in Administration Branch, 5th Floor, Phase-2 building, Maulana Azad Institute of Dental Sciences, New Delhi-110002 on or before 25th October 2024 upto 4PM. One copy submitted to shall also be documents with relevant form along Application of oralmucositisayurgyan@gmail.com. The shortlisted candidates shall be called for interview, the details of which will be communicated on the institution website (www.maids.delhi.gov.in).

The details of the notified post are mentioned below: -

S.	Post	Vacancy	Salary	Qualifications & Essentials	Age limit (as
No.					25.10.2024)
1.	Research Associate (RA) <u>Tenure- Initially</u> <u>for 1 year</u>		As per ICMR Guidelines	a) Essential: - M.D.S – Oral Medicine and Radiology/ Oral Pathology and Microbiology from DCI recognized Dental College	35 years
		A.		b) Desirable: - 3 years research/ teaching experience after Master's degree with at least 01 research papers in Science Citation Indexed (SCI) journal	2

Prof: Sunita Gupta (SAG) **Principal Investigator**

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TERMS AND CONDITIONS AND INSTRUCTIONS

Mode of	Subsequent to scrutiny of documents, shortlisted candidates will be called for			
Selection for the Post	Interview			
How to Apply	 The application form is available on the website <u>www.maids.delhi.gov.in</u>. The applicants must fill in the prescribed form available on the institute website. Complete Application along with the documents shall be submitted on or before 26-10-2024 (Friday) Up-to 4 PM directly by hand or by Post in Room no. 116, Administration Branch, 1st Floor, Maulana Azad Institute of Dental Sciences, New Delhi-110002. Mention <u>the Name of the Project and Post applied for on top of the Envelope.</u> 			
Documents to be attached with Application form	a) Self-attested copies of certificates in support of Age, Experience, Qualifications, Publications and Other Qualifications			
	 (Technical/Professional) if any. b) Brief CV (limited to 2-3 pages) and c) Passport Size Photograph 			

- 1. This post is purely on contract basis. The incumbent will also have no right for the regular appointment.
- 2. **Duration of Contract is** for a period of <u>**01 YEAR**</u> initially and extendable upto the maximum duration of the project.
- 3. Age and experience will be reckoned as on the last date of closure of application.
- 4. Those whose results are awaited can also apply for the post.
- 5. Late/ Incomplete applications shall not be entertained and rejected straight away, without any communication and correspondence.
- 6. Appointment can be terminated at any time during the engagement from either side after serving a notice period of one month.
- 7. The Competent Authority reserves the right to change the number of vacancies, withdraw the process in full or in part and also the right to reject any or all applications received without assigning any reasons or giving notices etc.
- 8. Candidates already employed should submit a "No Objection Certificate" from their employer at the time of interview failing which he/she will not be allowed to appear in the interview.

- "Call for Interview" shall be displayed on the Institution Website (<u>www.maids.delhi.gov.in</u>).
 <u>Kindly follow the Institution Website for updates and information.</u>
- 10. No TA/DA or other allowances will be paid to the candidate for interview or for joining the post.
- 11. Leaves shall be as per the ICMR's policy for project.
- 12. The decision of the Competent Authority regarding selection of the candidate will be final and no representations will be entertained in this regard in any circumstances.
- 13. A list of Selected Candidates as well as Wait list candidates shall be displayed on the Institution Website i.e. <u>www.maids.delhi.gov.in.</u>
- 14. In case of any query, kindly contact Dr. Shikha +91-9910419028, between 02.00 to 04.00 pm only from Monday to Friday.

"The Institute will not be responsible for any postal delay on the part of any delivery agency"

Kindly follow the Institution Website for further updates and information. (www.maids.delhi.gov.in)

MAULANA AZAD INSTITUTE OF DENTAL SCIENCES (An Autonomous Institution under GNCT of Delhi) MAMC Complex, B. S. Zafar Marg, New Delhi-110002

Affix Recent Passport Size Photograph

APPLICATION FORM

Applied for Post of - _____

1.	Name	
	(IN BLOCK LETTERS)	
1A.	Gender	Male: Female:
2.	Father/Husband's Name (In Block Letters)	
3.	Permanent Address (In Block Letters)	
	State	
	Pin No.	
	Postal Address (In Block Letters)	
4.		
	State	
	Pin No.	
5.	Contact Number:	
6.	Email ID	
7.	Date of Birth	

8. Educational Qualifications: (Enclose self-attested copy of all the marksheets & certificates)

S.No.	Qualifications	Subjects/ Specialty	Board/ Institute/ University	Year of Passing	Marks Obtained in Percentage
1.	Matriculation				
2.	Sr. Secondary				
3.	Graduation				
4.	Post-Graduation (MDS/ M.Sc.)				
5.	Others				

9. Details of Work Experience: - (Enclose self-attested copy of its supporting documents)

Place of Work – Name of Hospital/ Institute/ Clinic with	Designation	Pay Scale or Gross	Period of I	Employment
Address		Salary	From	То

10. Research Work/ Published work/ Scholarship/ Fellowships: - (*Attach enclosures as supporting documents*)

DECLARATION

I hereby declare that the entries in the above columns are true to the best of my knowledge, belief and nothing has been concealed or misrepresented.

Date:

Signature of the Candidate: _____

Name of the Candidate: _____