RAJARSHI DASRATH AUTONOMOUS STATE MEDICAL COLLEGE AYODHYA

Email ID: principalgmcayodhya@gmail.com

Ref. No.:- MCA/Advertisement/2025/ 145

Website: www.asmcayodhya.ac.in

Dated: - 27/01/2025

Faculty Recruitment

Applications are invited on the prescribed format available at website: asmcayodhya.ac.in for Regular posts of Professor, Associate Professor and Assistant Professor, Rajarshi Dashrath Autonomous State Medical College Ayodhya. The tentative numbers of the posts are given below:-

0	Name of Specialty		Profe	essor		A	Associate	Profess	sor	Assistant Professor								
S. N.	Name of Specialty	UR	OBC	110165551		OBC	SC	EWS	UR	OBC	SC	EWS	ST					
1	Orthopaedic Surgery	-	-	01			-	01	-	01	-	01	-	-				
2	Ophthalmology	-	-	01	-	-	-	-	-	-	-	-	-	-				
3	Obs & Gynae	-	-	-	-	-	-	-	-	01	01*	-	-	-				
4	Immuno Haematology and Blood Transfusion	-	-	y = 1	-	-	01	-	-	-	-	01	-	-				
5	Emergency Medicine	01	-	-	-	01	-	-	-	- 01	01	01	-	-				
6	Anaesthesia	01	-	-	-	-	-	-	-	01	-	-	-	_				
7	ENT	-	01	-	-	-	-	01	-	-	01**	01**	-					
8	Community Medicine	-	-	-	-	01	-	-	-	-		01	-					
9	General Medicine	-	-	-	01	01	-	-	-	01	- 01	01	-	0				
10	General Surgery	-	-	-	-	-	01	01	-	01	01		-	-				
11	TB & Chest	-	-	-	-	01	-	-	-	-	-	-	-					
12	Dermatology	-	-	12	-	-	01	-	-	-	-	-	-	-				
13	Paediatrics	-	01	-	-	-	-	-	-	01	01	-	-	-				
14	Pathology	-	-	-	-		-	-	-	-	01	-	-	-				
15	Forensic Medicine	-	-	-	-	-	-	01	-	-	-	-	-	-				
16	Microbiology	-	01	-	-	-	-	-	-	-	01	-	-	 				
17	Radio Diagnosis	_	01	-	-	-	-	01	-	01	-	-	- 01	-				
18	Radio-Therapy	-	-	01	/-	01	-	-	-	-	-	-	01	-				
19	PMR	01	-	-	-	-	-	-	-	-	-	01	-	-				
	Total	03	04	03	01	05	03	05		07	08	07	01	0				
							13		24									

Note:- * Antenatal Medical Officer cum Assistant Professor in the Department of Obs & Gynae. ** Medical Officer cum Assistant Professor in the Department Community Medicine (RHTC/UHTC).

All Qualifications subjected to latest NMC Notification.

For Details regarding Qualification, Pay Scale Application Fee, Eligibility etc please refer to college website: asmcayodhya.ac.in

- 1- Qualification/Experience for the posts of faculty will be as per latest NMC norms on Last date of form submission.
- 2- A candidate for the post(s) in the service must have attained the minimum age of 26 years & must not have attained the Maximum age 65 years on the first day of July of calendar.

3- Pay Scale-

- i. Professor- Academic Level 14, Initial Pay Rs. 1,44,200.00
- ii. Associate Professor Academic Level 13 A, Initial Pay Rs. 1,31,400.00
- iii. Assistant Professor Academic Level 11, Initial Pay Rs. 68,900.00

(The Pay/Allowance of the Professor, Associate Professor and Assistant Professor in the State Medical College by the State Government will be permissible)

4- Application fee:-

A demand draft of Rs. 500/- (Rs. Five hundred) in favour of "Autonomous State Medical College Society Ayodhya" payable of Ayodhya is mandatory as application fee. Alternatively application fee of Rs. 500/- (Rs. Five hundred) may deposit online in Bank of Baroda, Account no.- 37850100007565 IFSC code- BARBODEOKAL, Branch Deokali, Ayodhya. Proof of which has to be attached along with the application form. A candidate has to present proof of payment of application fee at the time of interview. Failing which he/she will not be allowed to appear for the interview.

- 5- No TA/DA for attending the interview is payable.
- 6- Number of posts may increase or decrease.

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7- Interested candidates are invited to send their application on prescribed format (download from - asmcayodhya.ac.in) along with all relevant documents latest by 25-02-2025 till 05:00 PM to the office of the Principal, Rajarshi Dashrath Autonomous State Medical College, Ayodhya, 224133 (U.P) only by registered/speed post.

8- Ex-Service persons/DNB qualified candidates also apply as per NMC norms.

9- It will be mandatory for the candidates working in any institute to submit the No Objection Certificate of the concerned institute for the application.

10- Application received after due date, time and incomplete in any form will not be considered.

Principal tone Rajarshi Dashrath Autonomous State Medical College Ayodhya

Rajarshi Dashrath Autonomous State Medical College, Ayodhya

Application Form

Post	
Note: - All information must be	completed by the applicant.
 Male/Female Father/Husband's Name (inc.) Present Address of Residence 	Self Attested Photo ce (including PIN code)
	Phone No
Mobile No	Email ID
5. Permanent Address	
Name of the City	Phone No
Mobile No	Email ID
6. Aadhar card number (if any))
7. Date of birth (enclose the m	ark sheet of high school examination)
8, Age of applicant as on 01-7-	-2024 Day Month Year
9. Applicant's Marital Status:-	Married /Unmarried
10. Date of Marriage	
11. Category: Unreserved / Sch	eduled Caste/Scheduled Tribe / Other Backward Class
/ Disabled	
(Attach photocopy of certifica	te issued by competent authority of reserved category)
12.Registration Number and Na	ame of the Medical Council and Date
a. MBBS-	
b. MD/MS-	
c. MCh/DM-	

13.Educational Qualification: (Enclose attested photo copies of certificates and marks sheets)

	No	Name of the Examination	Institution/ Board/ University	Year	Subject	Marks Obtained/ Max Marks	MBBS Total Marks/ Percentage	Effort (attempts)
and the same	1	MBBS						S SEASON STATE
	2	MD/MS						9272 AZ
	3	DM/MCh						

14. Educational Experience:-

No	Designation	From	To	Duration	Institution Name
1	Professor				
2	Associate Professor				
3	Assistant Professor				25.77
4	S.R./Tutor/Demonstrator				

(Attach experience certificate)

15. Research Publications:-

No	Designation	Research Publications
1	Professor	
2	Associate Professor	
3	Asstt. Professor	
4	S.R./Tutor/Demonstrator	

(Attach Photo Copy)

16. Application Fee:

(A demand draft of Rs. 500/- (Rs. Five hundred only), I favor of "Principal Rajarshi Dashrath Autonomous State Medical College, Ayodhya" payable of Ayodhya is mandatory as application fee. Alternatively application fee of Rs. 500/- (Rs. Five hundred only) may deposit online in Bank of Baroda, (IFSC code- BARBODEOKAL) Branch Deokali, Ayodhya.

Account no.-37850100007565 IFSC code- BARBODEOKAL proof of which has to be attached along with the application form.)

17. List of attached certificates	
Place	
Date	

// Announcement //

- 1- I certify that the above information given by me is complete and true. In the event of information being false, my application form / appointment letter can be cancelled.
- 2- I certify that I have not been found guilty by any court of any offense of moral decimation nor is there any such case against me in any jurisdiction.

Place	 	
Date	 	

Full Name and Signature of the Applicant

Check List

Name of Applicant

Sr. No.	Check List	Yes/No
1	Demand Draft/ Fee Payment Receipt	
2	Self-Attested Photograph & Documents	
3	Aadhar card & Pan Card	No. of the second second
4	Category Certificate	
5	DOB Certificate/High School Certificate	
6	UG, PG Degree	
7	UG, PG Registration	
8	Experience Certificate	
9	Research Publications with Indexing	
10	NOC if in Government Service	

Place	 •••	••	٠.	•	 •	•	•	• •	•	•	•	•	•	•	•	•	•	•	•	•	
Date	 																				

Signature of the Applicant