

## **ADVERTISEMENT**

**SIDDHPUR. DENTAL COLLEGE & HOSPITAL, DETHALI.**

Under

**SOCIETY FOR GUJARAT DENTAL HEALTH  
EDUCATION AND RESEARCH,**

(An Organization of Gujarat State Government )

Applications are invited for appointment & preparation of waiting list for the posts of Professors, Asso.Professors, Assi.Professors & Tutors in dental subjects at Siddhpur Dental College & Hospital, Dethali, Siddhpur. Duly filled in application form is to be submitted along with necessary copies of documents .

Qualifications and Experience as per Government Rules & DCI/ MCI Regulations.

**Application for these posts will be accepted on 28/12/2018 from 10:00 am to 1:00 pm at Govt. Dental College & Hospital, Civil Hospital Compund, Asarwa, Ahmedabad. Shortlisted candidates will have to appear for Oral Interviews. Details for the same will be uploaded on the websites.**

The Chairperson, Society for Gujarat Dental Health Education and Research, reserves the rights to accept/reject any application without assigning any reason.

Format of Application, vacancies and other details are available on our Web sites:

[www.gujhealth.gov.in](http://www.gujhealth.gov.in) , [gdchahmd.org](http://gdchahmd.org), & [sgdher.org](http://sgdher.org)

**Special Attention:**

For latest update, candidate must remain in touch with our above Websites.

**Chairperson**

# Siddhpur Dental College

## Society for Gujarat Dental Health Education and Research

Application for these posts will be accepted on 28/12/2018 from 10:00 am to 1:00 pm at Govt. Dental College & Hospital, Civil Hospital Compund, Asarwa, Ahmedabad. Shortlisted candidates will have to appear for Oral Interviews for Siddhpur Dental College under Society for Gujarat Dental Health Education and Research. Selection of candidates for regular/contractual appointment on the posts of Professors, Asso.Professors, Assistant Professors/Senior Lecturer & Tutors in various Dental subjects . Details for the same will be uploaded on the websites. Application form duly filled in is to be submitted along with necessary copies of testimonials .

Qualifications and Experience as per Government Recruitment Rules & DCI/MCI Regulations.

No TA/DA will be paid for attending interview.

The Chairperson, Society for Gujarat Dental Health Education and Research, reserves the rights to accept/reject any application.

### QUALIFICATIONS:-

Qualifications and teaching experience shall be as per Government Recruitment Rules & Regulation of Dental Council of India/Medical Council of India as amended from time to time.

Applicant's up to the age of 65 years will be eligible. Selected Candidate will be appointed on temporary/contractual basis with regular scale of pay/fixed pay as mentioned here in below.

### POSTS AND PAY SCALE

Name of post	Pay scale for full time
Professor	37400-67000 (GP-10000)
Associate Professor.	37400-67000 (GP-8700)
Assistant Professor/Senior Lecturer.	15600-39100 (GP-7000)
Tutor	9300-34800 (G.P-5400)

The knowledge of computer literacy is desirable.

Those candidates in service have to submit NOC / Relieving order from their employer.

The candidates should come in person and bring their application with original and Xerox copies of following certificates in the sequence mentioned below while appearing for interview.

**List of certificate:**

- |  |                                     |
|--|-------------------------------------|
| 1. FINAL MBBS/BDS Mark sheet.                          | 11. Passport Size Latest Photograph |
| 2. FINAL MBBS/BDS Attempt Certificate.                 | 12. Research Publication.           |
| 3. P.G. MARK SHEET                                     | 13. NOC/Relieving Order             |
| 4. P.G. Attempt Certificate.                           | 14. Hsc & Ssc Marksheet             |
| 5. MBBS/BDS: GMS/GDC Registration Certificate.         | 15. Cast Certificate                |
| 6. P.G.GMC/GDC Registration Certificate.               |                                     |
| 7. Degree Certificate.                                 |                                     |
| 8. Teaching Exp. Certificate.                          |                                     |
| 9. Internship Completion Certificate                   |                                     |
| 10. School-Leaving Certificate/Birth Date Certificate. |                                     |

### Number of post

Sr no	Department				
		Professor	Associate Professor	Assistant Professor/Senior Lecturer.	Tutor
1	Prosthodontics	-	3- Gen.	2-Gen. 1-SEBC	1-SEBC
2	Oral Pathology	-	-	1-Gen.	-
3	Conservative Dentistry	1-Gen.	3- Gen.	2-Gen. 1-SEBC	1-Gen. 1-ST 1-SC
4	Oral & Maxillofacial Surgery	-	1- Gen.	1-Gen.	-
5	Periodontics	-	3- Gen.	1-Gen.	1-SEBC
6	Orthodontics	-	2- Gen.	-	-
7	Pedodontics	1-Gen.	-	1-Gen.	2-Gen.
8	Oral Medicine	1-Gen.	-	1-Gen.	-
9	Public Health Dentistry	1-Gen.	1- Gen.	-	-
	<b>Total</b>	<b>04</b>	<b>13</b>	<b>11</b>	<b>07</b>

**SOCIETY FOR GUJARAT DENTAL HEALTH EDUCATION AND RESEARCH,  
C/o Govt. Dental College & Hospital Ahmedabad.**

**( An Organization of Gujarat state)**

**APPLICATION FORM**



1. Post Applied for :- \_\_\_\_\_ Subject \_\_\_\_\_
2. Name of candidate :- \_\_\_\_\_  
& Address \_\_\_\_\_  
**(In Block Letter)**  
Telephone No. with code :-( Phone) \_\_\_\_\_ (Mobile) \_\_\_\_\_  
Local Contact address :- \_\_\_\_\_
3. Category :- SC  ST  SEBC  Other
4. Date of Birth :- \_\_\_/\_\_\_/19\_\_\_ Age:- \_\_\_year:- \_\_\_Month:- \_\_\_
5. Sex :- Male/Female
6. Present Job :- \_\_\_\_\_

**7. Educational Qualitification :-**

Sr.no	Examination	Year of Passing	University	Total Marks	Percentage	Attempt
1	MBBS/BDS					
2	MD/MS/MDS					

**8. Detail of Teaching Experience :-**

Sr.no	Teaching Post Held	Name Of Institution	Date		Total Period	
			From	To	Year	Month
1						
2						
3						
4						
5						

**9. Details of Research papers publications.**

Sr.no	Year of Publication	Name of Journal	National /International	Whether Journal is an indexed Journal (Yes/No)	Name of Article
1					
2					
3					
4					
5					

10. Detail of Medical/Dental Council Registration :-

Registration No. U.G. \_\_\_\_\_ P.G. \_\_\_\_\_  
Date of Registration U.G. \_\_\_\_\_ P.G. \_\_\_\_\_  
Name of Council U.G. \_\_\_\_\_ P.G. \_\_\_\_\_

11. Name of two reference persons. (With Phone No)

1. \_\_\_\_\_  
2. \_\_\_\_\_

List of the Enclosures (attested copies-in following order) please mark the tick on attached enclosures.

- |  |   |
|--|---|
| 1. FINAL MBBS/BDS Mark sheet.                  | 8. Teaching Exp. Certificate.   |
| 2. FINAL MBBS/BDS Attempt Certificate.         | 9. Internship Completion Certificate                                      |
| 3. P.G. MARK SHEET                             | 10. School-Leaving Certificate/Birth Date Certificate & Cast Certificate. |
| 4. P.G. Attempt Certificate.                   | 11. Research Publication.   |
| 5. MBBS/BDS: GMS/GDC Registration Certificate. | 12. NOC/Relieving Order   |
| 6. P.G.GMC/GDC Registration Certificate.       | 13. HSC& SSC Marksheet  |
| 7. Degree Certificate.                         |   |

**Undertaking**

I declare that information stated above are true to the of my knowledge. If above information is found to be false. I will obey the decision of selection committee.

Place:- \_\_\_\_\_

Date:- \_\_\_\_\_

**Signature of Applicant**