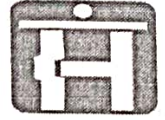




GOVT. OF NCT OF DELHI  
SANJAY GANDHI MEMORIAL HOSPITAL (SGMH)  
MANGOLPURI: DELHI 110 083



EPABX No: 011-27900333 (011-27900100-339) Fax: 011-27924403, E-mail:  
ms-sgmh@delhi.gov.in , admsgmh@gmail.com

F.1 (349)/JR Reg.Dental Exam/Oct/2021/ 8859-62

Dated:- 10/07/25

**Advertisement**

**Written Test for the selection Junior Residents on Ad-hoc Basis for a period of 89 days in Dental Department, )SGMH)**

**Total posts: 03 (UR-2, OBC-1)**

Applications are invited for recruitment of Junior Resident (Dental) on adhoc basis against vacant posts for a period of 89 days, which is extendable upto 1 year subjected to satisfactory work conduct and performance.

Candidates must submit the following documents in hard copy by post / by hand to R & I Section, SGMH, S Block, Mangolpuri, Delhi-110083 latest by 21.07.2025 upto 4.00 p.m.:

1. Duly filled application form with photograph.
2. Self attested copies of certificates (10th class, BDS certificate, Dental Council of India registration, Internship certificate and category certificate).

The candidates may note that applications received after cut-off date and time will not be considered. Any delay in post will not be considered.

The following schedule will be followed for the selection of JR (Dental):

S.NO	SCHEDULE TO BE FOLLOWED		DATE
1	Uploading of advertisement for the post of JR Dental (Adhoc Basis).		10.07.2025
2	Last date for receiving application along with documents.		21.07.2025
3	Date of uploading the list of eligible candidates for written examination of JR (Dental) on Official Website of Department of Health and Family Welfare, GNCTD		30.07.2025
4	Date of written exam of shortlisted candidates for JR Dental (Adhoc basis).	Final date and venue will be announced on 12.08.2025, along with selection criteria	
Result will be displayed on Official Website of Department of Health and Family Welfare, GNCTD			

Note: If PwD category candidate applies and is selected, that candidate will be given preference as per rules.

*[Handwritten signature]*

*[Handwritten signature]*

**The eligibility criteria:**

**1. Qualification:**

The Candidate must possess BDS degree from a recognized university/institution and valid Registration Certificate from Dental Council of India.

If selected, candidate must submit his/her Delhi Dental Council Registration Certificate at the time of appointment.

**2. Internship:**

Candidates must have completed compulsory rotatory internship on or after 21.07.2024. (Candidates who have completed internship earlier than 21.07.2024 are not eligible).

**3. Pay Scale:**

As per 7th CPC Pay Matrix level 10 Pay (Rs. 56100/- plus allowance) as admissible under the extant rules.

**4. Age:**

30 years as on date of interview and relaxable as per applicable norms for reserved categories on the cut-off date of Advertisement. OBC candidates are required to submit their updated caste certificate issued by the Govt. of NCT of Delhi on prescribed format on or before the cut-off date.

**5. Tenure:**

The maximum tenure of is for a period of one year only including any service rendered as Junior Resident earlier on Ad-hoc/Regular basis in any recognized institution. The appointment will be initially for 89 days that can be extended further up to a maximum period of 01-year subject to satisfactory performance, work and conduct report from concerned HOD and written request from the doctor concerned.

**Other conditions/requirements:**

1. In case of non-availability of candidates of reserved categories, the post shall be filled on Ad-hoc basis (for 89 days period) from the eligible candidates of other categories.
2. The services of Junior Resident shall be governed by Residency Schemes of Govt. of India.
3. Candidates are required to bring Identity Proof (i.e. Aadhar Card, Election ID Card/ Passport/Driving License) on the date of Written Test.
4. OBC certificates issued from Govt. of NCT of Delhi shall only be accepted.
5. OBC candidates who wish to consider against the OBC vacancies must have in Possession of valid Non-Creamy Layer Certificate at the cut-off date.





6. Appointment shall be subject to medical fitness & verification of certificates.
7. No TA/DA will be paid for appearing in the interview.
8. Hostel Accommodation is subject to availability

**NOTE:**

1. Selection Board/Competent Authority reserves the right to amend, cancel and make any changes in the advertisement.
2. All Applications must be submitted by post/hand to R & I Section latest by 21.07.2025 upto 4 P.M. Applications received after 21.07.2025 will not be considered.

F.1(349)/JR Reg.Dental Exam/Oct/2021/ 8859-62

Dated:- 10/07/2025

  
(DR. SUMITA SAHA KANWAR)  
Deputy Medical Superintendent/HOO

Copy forwarded to:

1. Notice Board, Administrative Block, SGMH
2. Notice Board, Resident Doctors Hostel, SGMH
3. Vacancy Section of H&FW Deptt. Website
4. MS of all Delhi Government Hospitals through mail

  
(DR. SUMITA SAHA KANWAR)  
Deputy Medical Superintendent/HOO





**Application for the post of Junior Resident (Dental)**

1. Name of the Candidate: .....
2. Father's/Husband Name:.....
3. Date of Birth: .....
4. Age as on Interview Date. ....
5. Postal Address: .....  
.....
6. Permanent Address: .....  
.....  
.....  
.....
7. Category -UR /SC/ST/OBC (OBC of Delhi Only)/ PH: .....
8. Mobile No. ....
9. Email address: .....

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photograph

BDS (Year of passing)					
Date of Completion of internship	Delhi Dental Council Reg. No.				
Delhi Dental Council Reg. No.					
College Name					
University Name					
% of marks (Final Year)					
No. of Attempts	1 <sup>st</sup> year	2 <sup>nd</sup> year	3 <sup>rd</sup> year	4 <sup>th</sup> year	

10. Experience Details: .....

I solemnly declare that the above statements made by me are correct to the best of my knowledge and nothing has been concealed thereof.

Further, I do undertake that if the above statements are found false at any stage in future, my appointment may be cancelled, and I shall be liable for disciplinary action whatever deemed fit.

Place: .....

Date: .....

(Signature of Applicant)

**CHECK LIST FOR INTERVIEW OF JUNIOR RESIDENT (DENTAL)**

**The Candidates are instructed to enclose the following documents with application form in that order from no. 1 to 9:**

Sr. No.	DOCUMENTS	CHECK LIST
1.	APPLICATION FORM	
2.	DOB CERTIFICATE (10 <sup>TH</sup> CERTIFICATE/MARKSHEET)	
3.	CASTE CERTIFICATE.	
4.	BDS MARKSHEET AND CERTIFICATE.	
5.	INTERNSHIP COMPLETION CERTIFICATE	
6.	ATTEMPT CERTIFICATE	
7.	BDS DEGREE	
8.	DELHI DENTAL COUNCIL REGISTRATION CERTIFICATE (BDS)	
9.	AADHAR CARD	

**(Signature of Applicant)**