OFFICE OF THE MEDICAL SUPERINTENDENT BAHAWAL VICTORIA HOSPITAL BAHAWAL VICTORIA HOSPITAL

Phone #. 9250460 Fax #. 9250288

HOUSE JOB OPPORTUNITIES ONLY FOR THE SUPPLEMENTARY -2021, GRADUATES OF QUAID-E-AZAM MEDICAL COLLEGE BAHWALPUR.

Fresh successful graduates (MBBS) of Host college (Quaid-e-Azam Medical College, Bahawalpur) for the session Supplementary-2021 result announce 2022 by hand applications are invited for House Job (foundation year-Four rotations as per PMC policy) in Bahawalpur Victoria Hospital, Bahawalpur.

ELIGIBILITY OF HOUSE JOB:-

Only Fresh Supplementary Graduates of Quaid-e-Azam Medical College, Bahawalpur are eligible for this particular selection as per Government policy.

Foreign candidates (QAMC Graduates) will deposit 06 attested pictures, 06 attested copies of Valid Visa & 06 copies of passport apart from the above documents.

FOLLOWING ATTESTED COPIES OF COMPULSORY DOCUMENTS SHALL BE ENCLOSED WITH THE APPLICATION:-

- 1. Copy of Provisional Registration of PMC
- 2. Copy of Matriculation Certificate
- 3. Copy of F.Sc Certificate
- 4. Copy of Result of all four Professionals (Five DMCs)
- 5. Copy of Attempt Certificate
- 6. Copy of Provisional Certificate
- 7. Copy of Domicile
- 8. Copy of N.I.C
- 9. Photos

SCHEDULE FOR SELECTION

Following schedule will be observed:

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Last date for submission of application	14-09-2022	During Office hours
Display of Tentative Merit List	17-09-2022	till 02-00 PM
Appeal on merit list (if any)	19-09-2022	Till 2:00 PM
Final Merit List	20-09-2022	-do-
Interview	21-09-2022	10-00 AM in QMC
Commencement of House job	22-09-2022	No joining without PMC Provisional
		Registration / Receipt

No orders will be issued until/unless candidate submits provisional PMC.

Medical Superintendent B.V.Hospital, Bahawalpur

No.Gen.Br/E-51/4781-4830

/BVH dated Bahawalpur the

10-09-2022.

Copy forwarded for information to:-

- 1. The Principal, QAMC, BVH, JFH, & SON, Bahawalpur.
- 2. All Professors of Clinical Units of this Hospital for information and they are requested to attend the same on specific date and time.
- 3. Incharge Madadgar Centre, B.V.Hospital, Bahawalpur.
- 4. Notice Board of M.S. Office, Principal Office, LDH, Officer Lodge & all College Hostel.

Medical Superintendent
By Cappital, Bahawalpur

APPLICATION FORM FOR HOUSE JOB IN TEACHING
HOSPITALS OF SHC & ME DEPARTMENT

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7 ·	Father Profession		Do not staple
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6	NIC Number		
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Rank :	••				ention your preferred rotations in order of priority; as per notified list of units of this hospital)
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Important Instructions:

- 1) The form is to be submitted to the office of the Medical Superintendent, (Name of Hospital) as
- tists of selected NOs based on merit shall be displayed on the Notice boards of Medical Superintendent, Concerned Units as well as at the College / hospital websites
- 3) Documents to attach (Attested Photocopies)
 - a. Matric certificate
 - b. F.Sc Certificate
 - A18BS Degree/ Provisional Certificate
 - d. Result cards of all professional exams CNIC/Passport

 - f. PMDC registration (or receipt of application of Registration to PMDC)
 - Three passport size photographs (one to be pasted on the front page and two to be stapled)
- 4) No application shall be entertained without the above documents
- 5) No Dues Certificate (NOC) from warden boys/girls hostel from concerned University / College
- 6) Compulsory Rotations:
 - a. Major Medicine
 - b. Major Surgery
 - c. Minor Specialty (Allied Medicine)
 - d. Minor Specialty (Aliled Surgery)
- 7) Every applicant must opt for the 4-compulsory rotations of three months each
- 8) Applicants will be divided into 4 batches. Each batch will be rotated according to their merit Major Medicine, any Allied Medicine and Major Surgery, any Allied Surgery (as per Schedule for Rotation)
- 9) In case of termination of job, experience certificate will not be issued. House Job certificate will only be issued after the testimonial of the Head of the Department / Unit.

- i) I do hereby solemnly declare that the information given by me in this application form is true and correct to the best of my knowledge and belief. I fully understand that the facts given above will serve as the basis for determination of my eligibility by the concerned authorities. My candidature so determined by the board/authorities will stand provisional until it is verified with the original certificates at the time of interview. I will not claim benefit of any information which is not mentioned in the application form and is produced later on.
- ID I declare that I have not been already employed anywhere for house job and I am submitting my application through proper channel and I will ensure that I shall resign from my existing post (if any) when selected.
- iii) I undertake to serve for the term of one year in case of selection as an internee house Surgeon/physician.
- (v) I solemnly declare that I shall be legally bound to surrender my security of Rs. 1000/- in case I leave House Job
- v) I undertake to produce the registration of PMDC.
- vi) I have also read the rules and regulations and I am submitting the alfidavit on judicial paper worth Rs. 50/- duly signed and attested by the oath commissioner.

Lalso understand that after the submission of application, if my application stands incomplete, wrongly filled, unsigned or misstated in the above replies, disciplinary action shall be taken against me under the rules.

Signature of the Applicant

Official Use Only

Comments/Status

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SAMPLE OF AFFIDAVIT TO BE SUBMITTED ON JUDICIAL PAPER OF RS.50/- ATTESTED BY THE OATH COMMISSIONER.

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AFFIDAVIT

l Dr.	
(Name	of Hospital) do hereby solemnly declare and affirm as under: -
1. lw	I not take part in any association / union.
2. 1 v slo	ill not take part in any subversive activities i.e. strikes, demonstrations
3. I w	ill be bound to abide by the rules, regulation and orders issued by hospital authorities. I have read the rules and regulations carefully.
4. Th	at if, I am found indulged in any such activities and violations of es and regulation, my house job will be liable to be terminated hout assigning any notice.
	Signature: Name: Dr. S/O, D/O, W/O Phone No (Rep.)
	Mobile No

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