सत्यमेव जयते

GOVERNMENT OF JAMMU AND KASHMIR
GOVERNMENT MEDICAL COLLEGE DODA
****

Subject: Advertisement for engagement of candidates for the tenure posts of Senior Resident / Tutor / Demonstrator in different disciplines of Government Medical College, Doda.

ADVERTISEMENT NOTICE No: 09-GMCD of 2026
D A T E D: 23-11-.2026

Applications are invited from PSC/Non-PSC doctors, for the tenure posts of Tutor / Demonstrator / Senior Resident / Registrar in the following disciplines of Government Medical College, Doda for a period of one year extendable up to maximum of three years in terms of SO-364 of 2020 dated 27-11-2020.

S. No	Department	Name of Post	Total No. Posts
1.	General Medicine	Senior Resident	03
2.	T.B & Respiratory Disease	Senior Resident	02
3.	Psychiatry	Senior Resident	02
4.	Radio Therapy	Senior Resident	02
5.	Physical Medicine and Rehabilitation	Senior Resident	02
6.	Radio-diagnosis	Senior Resident	03
7.	Anesthesiology	Senior Resident	02
8.	General Surgery	Senior Resident	03
9.	Dermatology	Senior Resident	01
10.	Obstetrics & Gynaecology	Senior Resident	02
11.	Ophthalmology	Senior Resident	02
12.	Biochemistry	Senior Resident / Tutor / Demonstrator	01
13	Pathology	Senior Resident / Tutor / Demonstrator	01
14	Community Medicine	Senior Resident / Tutor / Demonstrator	01
15	Forensic Medicine	Senior Resident / Tutor / Demonstrator	01
16	Anatomy	Senior Resident / Tutor / Demonstrator	01

Candidates interested in applying for the said posts at Government Medical College, Doda can download the application form attached with this advertisement notice or can obtain the application form from main Campus of Govt. Medical college, Doda Ghat during working hours and can submit the application form in the office of the Principal Govt. Medical College, Doda or by email:**recruitmentgmcdoda@gmail.com** within a period of 10 days from the date of issuance of this advertisement notice.
The interested eligible candidate has to deposit application fee of **Rs-500/-** in the official account number of Government Medical College, Doda i.e. **0449010570000055**, EX Branch, J&K Bank, Doda, IFSC Code JAKAOEXDODA. **It is mandatory to attach the bank receipt with the application form (pdf format).**

Eligibility criteria:

1. **FOR INSERVICE (PSC) CANDIDATES**:
   a) Candidates after selection shall be paid as per LPC.
   b) NOC for undergoing Senior Residency / Tenure posting from parent department.
   c) After selection, candidate shall have to be relieved by the administrative department.
2. **FOR NON-PSC (NON-IN-SERVICE) CANDIDATES:**
   Selected Candidates shall be engaged on consolidated pay equal to basic pay of M.O/Assistant Surgeon of Health Department as per SRO-93 dated 15-04-2009.

3. **GENERAL CONDITIONS OF ELIGIBILTY FOR ALL CANDIDATES:**
QUALIFICATION: The post Graduate qualification of MD / MS/ DNB or higher qualification MCH/DM/DNB (super specialty) shall be mandatory required as per the eligible criteria of the post.

4. **APPLICATIONS SHOULD BE ACCOMPANIED WITH SELF ATTESTED COPIES OF THE FOLLOWING DOCUMENTS:**
   1. MBBS, MD/MS Degree in concerned subject (all **MBBS marks sheets**)
   2. Internship completion certificate.
   3. Registration Certificate (MBBS & MD/MS)
   4. Overall position certificate (1st, 2nd & 3rd Position) if any.
   5. Subject wise position certificate (1st, 2nd & 3rd position) if any.
   6. Distinction/National scholarship/Honours/Medals/Academic Merit Certificate.
   7. Paper presentation in National / International conferences, if any.
   8. Poster presentation in National / International Conferences, if any.
   9. Best paper Award
   10. Best poster award
   11. Best video presentation
   12. Service Certificate (clearly indicating rural service, if any) issued by DHS Jammu/Srinagar in respect of in-service candidates.
   13. Date of Birth Certificate (Matriculation certificate / Diploma)
   14. Domicile certificate.

- **The selection of the candidate shall be made in terms of Government Order No: 383 –JK (HME) of 2024 Dated: 20.06.2024.**
- The candidates are advised to fill the complete application form and attach all the requisite documents along with bank fee receipt with the application form. Incomplete form in any manner shall be rejected without informing the candidates.
- The number of posts advertised may increase or decrease at the time of selection.

Nadeem Kaur

Principal
Govt. Medical College,
Doda.

No.: GMC/D/Adm/191(CC:7979582) 4601–04 **Dated:** 23.11 **.2026**

Copy for information to the: -

1. Commissioner / Secretary to the Govt. Health & Medical Education Department, Civil Secretariat, Jammu.
2. Joint Director, Information Department, Jammu Division, Jammu with a request to publish the Advertisement Notice two leading newspapers of Jammu Division i.e. Daily Excelsior and State Times and of Kashmir Division i.e. Greater Kashmir and Rising Kashmir / Udaan.
3. In charge website, GMC Doda for uploading the same in Office website of GMC Doda.

Application Form

Post Applied For:_____ **Advt. No: -**_____**Dated**_____

PSC / Non – PSC _____

Name of the Candidate:_____

Parentage:_____

Date of Birth:_____

Permanent Address:_____

Contact No:_____

Email Id: _____

Space for Photograph

Academic Qualification

Examination	Subjects	Year of Passing	Maximum Marks	Obtained Marks	Percentage of Marks	Board/Institute/University
10th						
12th						
Professional Qualification						
MBBS						
MD/MS						
Any Other						

OTHER DETAILS				
Whether undergone Senior Residency / Tutor / Demonstrator earlier?		If yes, Name of the Medical College from where you have undergone Senior Residency / Tutor / Demonstrator	Duration of Senior Residency / Tutor / Demonstrator	Are you currently working ? Name of the Position and Name of the College where you are working?
Yes	No			

- **Poster Presentation in National / International Conferences (enclose if any)**
- **Paper Presentation in National / International Conferences (enclose if any)**
- **Certificate of Best Paper Award (enclose if any)**
- **Certificate of Best Poster Award (enclosed if any)**
- **Certificate Best Video Presentation (enclose if any)**

Name of the candidate	Name of the Bank Branch	No of fee receipt	Dated	Candidate's Contact No.

Signature of applicant