# NO. 2013/Admn -II/OS/\_\_\_\_\_ GOVERNMENT OF INDIA DIRECTORATE GENERAL OF HEALTH SERVICES LADY HARDINGE MEDICAL COLLEGE & SMT. S.K. HOSPITAL: N.DELHI

Filling up the post of Office Superintendents in the Pay Band PB-II 9300-34800+4200(GP) (Pre Revised Rs. 5500-175-9000) in Lady Hardinge Medical College & Smt. S. K. Hospital, New Delhi on deputation basis.

Applications are invited to fill up two posts of Office Superintendents in the Pay Band PB-II 9300-34800+4200(GP) (Pre Revised Rs. 5500-175-9000) in Lady Hardinge Medical College & Smt. S. K. Hospital, New Delhi on deputation basis from suitable candidates. The particulars of the post and eligibility conditions etc. are given in Annexure-I.

- 2. The pay of the selected officer will be regulated in accordance with Department of Personnel & Training OM No. 2/29/21-Estt. (Pay-II) Dt. 05.01.1994 and OM No. 02.08.1997-Estt (Pay-II) dated 11.03.1998 as amended from time to time.
- 3. The maximum age limit for appointment on deputation shall be 56 years as on closing date of receipt of application.
- 4. Applications in the given below proforma (Annexure-II) along with complete and up to date ACR dossiers of the officers who can be spared in the event of their selection, may be sent to the Director, Lady Hardinge Medical College & Smt. S. K. Hospital, New Delhi within a period of 60 days from the date of publication of this advertisement.
- 5. Applications received after the last date or without the ACR dossiers or otherwise found incomplete will not be considered. While forwarding the applications, it may also be verified and certified that the particulars furnished by the officers are correct and no disciplinary case is either pending or contemplated against him. The integrity of the officer may also please be certified.

(MANOJ KUMAR JHA)

## DEPUTY DIRECTOR (ADMN).

#### Annexure – I

- 1. Post: Office Superintendents (Group B, Non-Gazetted), LHMC & Smt. S.K. Hospital, New Delhi.
- 2. Pay Band: PB-II Rs. 9300-34800 + 4200 (GP)
- 3. Eligibility: By transfer on deputation basis.

### Officers under the Central Government

- (a) (i) Holding analogous posts on regular basis in the Pay Band PB-II with GP Rs.4200/-
  - (ii) with 10 years regular service in posts in the Pay Band PB-I with GP Rs.2400/- or equivalent and
- (b) Possessing two years experience of Administration, Accounts and establishment matters.

## 4. Period of Deputation:

Period of Deputation including period of deputation in another excadre post held immediately preceding this appointment in the same or some other organization/department of the Central Government shall ordinarily not exceed three years.

The maximum age limit for appointment by transfer on deputation shall not be exceeding 56 years as on closing date of receipt of applications.

#### **Annexure-II**

## **BIO DATA PROFORMA**

- 1. Name and Address (in Block Letters)
- 2. Date of Birth (in Christian era)
- 3. Date of retirement under Central/State Govt. rules
- 4. Educational Qualifications
- 5. Whether educational and other qualifications
  Required for the post are satisfied, (if any
  Qualification has been treated as equivalent to the one prescribed in the rules, state the Authorities for the same).

|    |           |      | Qualification/Exp. Required | Qualification/Exp. Possessed by the Officer |
|----|-----------|------|-----------------------------|---|
| 1) | Essential | 1)   |                             |   |
|    |           | 2)   |                             |   |
|    |           | 3)   |                             |   |
| 2) | Desirable | 1)   |                             |   |
|    |           | 2)   |                             |   |
|    |           | 3)   |                             |   |
| D1 |           | 4 .1 | 1 11 1                      |   |

- 6. Please state clearly whether in the light of Entries made by you above, you meet the Requirements of the post.
- 7 Details of employment, in chronological order, enclose a separate sheet, duly authenticated by your signature, if the space below is in sufficient: -

| Office/Instt./Orgn. | Post held | From | To | Scale of Pay | Nature of |
|---------------------|-----------|------|----|--------------|-----------|
|                     |           |      |    | & basic pay  | duties    |
|                     |           |      |    |              |           |

| 8      | Nature of present employment   |  |  |  |  |  |  |  |  |
|--------|--|--|--|--|--|--|--|--|--|
|        | (ad-hoc/temp./permanent/   |  |  |  |  |  |  |  |  |
|        | Quasi-permanent)   |  |  |  |  |  |  |  |  |
| 9      | In case present employment held on deputation/contract basis please state: - |  |  |  |  |  |  |  |  |
|        | a) The date of initial appointment   |  |  |  |  |  |  |  |  |
|        | b) Period of appointment od deputation/contract                              |  |  |  |  |  |  |  |  |
|        | c) Name of the parent office/organization                                    |  |  |  |  |  |  |  |  |
| 10     | Additional details about present employment:                                 |  |  |  |  |  |  |  |  |
|        | Please state whether working under:  |  |  |  |  |  |  |  |  |
|        | a) Central Govt. b) State Govt. c)Autonomous Org.                            |  |  |  |  |  |  |  |  |
|        | d) Govt. Undertaking   |  |  |  |  |  |  |  |  |
| 11     | Are you in a revised scale of pay, if yes,                                   |  |  |  |  |  |  |  |  |
|        | The date from which date the revision took place                             |  |  |  |  |  |  |  |  |
| 12     | Total emoluments per month drawn now:  |  |  |  |  |  |  |  |  |
| 13     | Additional information, in any, which would                                  |  |  |  |  |  |  |  |  |
|        | you like to mention for your suitability for the post.                       |  |  |  |  |  |  |  |  |
|        | Enclosed a separate sheet if the space is insufficient.                      |  |  |  |  |  |  |  |  |
| 14     | Whether belongs to SC/ST.  |  |  |  |  |  |  |  |  |
| 15     | Remarks  |  |  |  |  |  |  |  |  |
|        | Signature of the candidates  |  |  |  |  |  |  |  |  |
|        | Address  |  |  |  |  |  |  |  |  |
|        | Address  |  |  |  |  |  |  |  |  |
| Date:  |  |  |  |  |  |  |  |  |  |
| Place: |  |  |  |  |  |  |  |  |  |
|        | er signed by the employer  |  |  |  |  |  |  |  |  |
|        |  |  |  |  |  |  |  |  |  |