

Rajiv Gandhi Super Specialty Hospital
(An Autonomous Institute under Govt. of NCT of Delhi)
Tahirpur, Delhi-110093

Web: - www.rgssh.co.in , E-mail I'd:- msrgsshofficial@gmail.com

F. No.24/01/HOO/RGSSH/2018/ 52-58

Date:05/01/2022

OFFICE ORDER (COVID-19)

In view of recent INCREASE IN NUMBER OF Covid-19 cases and for preparation of 300 ICU Covid-19 dedicated beds, it is decided to have application for interview of Nursing officer, Pharmacist, Assistant Dietician, Radio technicians, Radiographers, Technician(OT, LAB, ICU, Anaesthesia), on Daily basis on shift duties as per remuneration vide office order Delhi Govt. having requisite qualification on daily basis /shift wise till the epidemic.

The applications will be submitted to MS office for further interview purpose as per requirement.

The candidates will be informed accordingly by website of hospital/ Phone no. / Email .

Above recruitment is specifically for Covid-19 management only. Extension will be subject to Covid-19 management and Covid-19 related orders of Govt. Of Delhi

This issues with the prior approval of the Worthy Director, RGSSH.


Dr. Ashok Kumar
Medical Superintendent, RGSSH

F. No.24/01/HOO/RGSSH/2018/ 53-58

Date:-7/1/22

Copy to:-

- 1.PS to the Director, RGSSH
- 2.DMS, RGSSH
3. All Clinical in charges/ lab incharges
4. Nodal officer Covid-19.
5. ANS for information.
5. DAK file.

GOT OF NCT OF DELHI
DEPARTMENT OF HEALTH AND FAMILY WELFARE
9TH LEVEL, A-WING, DELHI SECRETARIAT, DELHI
I.P. ESTATE, NEW DELHI-110002

F.14/H&FW/Misc./Covid-19/2021/CD#112647685/2420-32 Dated: 17/12/2021

ORDER

In continuation of order no. PA/SS-II/HFW/2020/Covid-19/CD-112604501/ 2037-45 dated 29.09.2021, Medical Directors/ Medical Superintendents/ Directors of all COVID Hospitals of Government of NCT of Delhi are allowed to requisition following medical manpower to augment the capacity to manage critically ill patients at the remuneration indicated against each post u/s 65 & 66 of Disaster Management Act, 2005, for the period upto 31.03.2022:-

S. No	Post	Honorarium per day per shift (Rs)	Minimum Qualification
1	Specialist	15000	Post Graduate + at least 5 years experience
2	Specialist	10000	Post Graduate
3	Consultant	10000	MBBS + at least 5 years experience
4	Consultant	6000	MBBS
5	Intern/Medical Student / Dental/ Ayush	4000	BDS/ Having the prescribed degree for Ayush doctors
6	Nurse/ ANM	2000	B.Sc (Nursing)/GNM
7	NO/ MTS/ Nursing Students	810	At least 10 th Pass with First Aid Course/ Doing Nursing degree/diploma
8	Security	800	10th Pass

This issues with the prior approval of the Hon'ble Lt. Governor.



(Ajay Bisht)
Dy. Secretary (H&FW)

To

- 1. MDs/MSs/Directors of COVID Hospitals of GNCTD.**
- 2. DGHS**

F.14/H&FW/Misc./Covid-19/2021/CD#112647685/2420-32 Dated: 17/12/2021
Copy to

1. Pr. Secretary (H&FW),GNCTD
2. OSD (H&FW), GNCTD
3. Secretary to Lt. Governor, Delhi
4. All Secretaries (H&FW), GNCTD
5. Nodal Officer (HR Vertical)
6. Addl. Secretary to Hon`ble Chief Minister, Delhi.
7. Secretary to Hon`ble Minister of Health, Delhi
8. Mission Director, DSHM, Delhi.
9. OSD to Chief Secretary, GNCTD
10. All Spl. Secretaries (H&FW), GNCTD.
11. System Analyst. H&FW for uploading the same on the website



(Ajay Bisht)
Dy. Secretary (H&FW)

INSTRUCTIONS FOR THE APPLICANT

- All appointments at RGSSH are on 'Contract Basis',
1. This application form **MUST** be neatly filled/ typed and signed by the applicant on each page of the application and only its pdf format shall be attached with the e-mail. The candidate shall ensure that all attached pdf are easily legible to be read, non legible pdf shall be duly rejected.
 2. Annexure I of application form, **UNDERTAKING** to be given in the main body of the email while applying for the post and its pdf copy to be attached along with the email.
 3. Each page of application form be signed by the candidate and in case, if not signed by the candidate application form shall be liable to be rejected.
 4. Application forms with overwriting/cuttings shall be duly rejected.
 5. Attach with e-mail self-attested copies of certificates, testimonials, and other relevant documents which support your claim for your eligibility for the applied post in pdf format only. Documents attached in other format like .jpg etc will not be accepted and application form will be duly rejected.
 6. In case self attested documents are not attached, application will be rejected.
 7. All columns **MUST** be completed in figures and/or in words. Fill up 'Not Applicable/Not Available' where the information is not applicable or not available; but **DO NOT** leave any column blank.

APPLICATION FORM

Name of the applicant: _____ Post applied for: _____

1. Post applied for: _____
2. Name (in Block Letter): _____
3. Father's/Husband's Name: _____
4. D.O.B.: _____
5. Age in Years _____ Months _____ Days _____ (As on last date of receipt of Application)
6. Whether SC/ST/OBC: _____
7. Address (Permanent): _____
8. Address for Correspondence: _____
9. Telephone No. : _____
10. Mobile No.: _____
11. Email address: _____

Passport size
photograph of
candidate duly
signed by himself

12. Educational Qualification (Starting from matriculation Examination onwards):

Degree/Exam	Name of Board/University	Year of Passing	Subjects	Percentage/ Division

13. Details of Experience (if any)

Name of institute	Designation	From	To

14. **Documents attached copy of (a)** Degree/Diploma and all marks sheets/grade card (); **(b)** Registration, if applicable(); **(c)** Experience (); **(d)** Information to /NOC from Previous Employer (); **(f)** Age proof ()

DECLARATION

I hereby solemnly declare and affirm that statements made in this application are true, complete, correct to the best of my knowledge and belief. I understand that in the event of any information/facts being found untrue/false/incorrect my candidature is liable to be cancelled/terminated besides taking any other action deemed fit in this regard. I will have no claim for absorption after termination/completion of contract period of tenure. I shall abide by the terms and conditions as prescribed.

(Signature & Name of Candidate

Place:

Date: