



GOA UNIVERSITY
Sub Post Office Goa University
Taleigao Plateau, Goa - 403 206 INDIA

Information Brochure

Goa University invites applications for the following post:

Sr. No	Post	No. of Post	Pay Matrix	Nature of vacancy
1.	Medical Officer	01-UR Unreserved	Level -10: ` 56,100-1,77,500	Regular

Application form may be downloaded from Goa University website www.unigoa.ac.in and submitted along with prescribed amount of fees. Applications duly completed in all respects shall reach the Registrar, Goa University on or before **10/02/2018**.

The qualifications prescribed for the post of Medical Officer are as follows:

Essential:

i) MBBS Degree from recognized Institution/University or medical qualification included in the First or the Second Schedule or Part II of the Third Schedule (other than licentiate qualifications) to the Indian Medical Council Act, 1956. Holders of qualifications included in the Part II of the Third Schedule should fulfill the conditions stipulated in Section 18 (3) of the Indian Medical Council Act, 1956.

ii) Completion of compulsory rotating internship.

iii) Knowledge of Konkani

Desirable:

i) Experience in the general Medical Practice or the concerned specialty, as the case may be.

ii) Knowledge of Marathi

Age limit: 45 Years (Relaxable by 5 years for persons in regular service of Goa University and relaxation for reserved category as per rules).

General Information

1. Candidates should send 6 copies of their application along with self attested photocopies of all relevant certificates in support of their educational qualification, experience caste and age. They should submit certificate issued by the employer, if employed, stating the pay and allowances drawn at present. They should also attach a copy of valid employment exchange registration card and 15 years of residence certificate in Goa issued by the competent authority.
2. The requisite fee of Rs. 1000/- by means of a crossed Demand Draft in favour of the Registrar, Goa University payable at Panaji Goa shall be enclosed by the candidates. Scheduled Caste/Scheduled Tribe category candidates have to pay 50% (Fifty percent) of the application fee. Physically Disabled candidates are exempted from payment of application fee. Money orders or cheques or cash will not be accepted by the University.
3. Applications should be sent to the Registrar, Goa University, SPO Goa University, Taleigao Plateau, Goa-403 206 so as to reach on or before the last date prescribed. The University reserves the right of accepting/rejecting applications received after the last date specified.
4. Any change of address given in column 2 of the application form should at once be communicated to the Registrar, at the above address.
5. All Annexures should be countersigned by the applicant.
6. Candidates who are already employed shall send their applications through proper channel.
7. Incomplete application forms and applications without requisite fee will not be considered.
8. The fee once paid shall not be refunded under any circumstances.
9. Candidates are advised to satisfy themselves before applying that they possess the prescribed qualifications. No query seeking advise on the eligibility shall be entertained.
10. Candidates called for interview shall have to be present themselves at their own expenses. No TA/DA shall be paid to the candidates.
11. Canvassing in any form by or on behalf of the candidate shall lead to disqualification of the candidate.
12. The selected candidate is required to reside on the University Campus and shall not be entitled for House Rent allowances.
13. The duties and responsibilities of the Medical Officer shall be as per Statute SA-41(8)(a).
14. The University reserves the right not to fill up the post advertised, or fill up the post on short term basis.

Date: 09/01/2018

Prof. Y. V. Reddy
REGISTRAR

Date of advertisement _____



GOA UNIVERSITY

AFFIX RECENT
PASSPORT SIZE
PHOTOGRAPH

To

The Registrar,
Goa University
Taleigao Plateau, Goa 403 206
Telephone No. 6519005/6519006
E-Mail : registrar@unigoa.ac.in

Application for the post of _____ in the Goa University

1) Surname First name Middle name

(a) Name in Full: Shri/ Smt/ Kum
(Beginning with surname and in block letters)

(b) Father's/Husband's Name

2) Postal address in full:
(in block letters)

Pin code:

Telephone/Mob. No.

E-mail:

3) Date and place of birth:

4) Age:

5) Nationality :

6) Whether belonging to reserved category: SC/ST/OBC/PD
(Attach attested copy of caste/disability certificate)

7) Educational Qualification:

Examination	University/ Board	Year of passing	Main Subject	Percentage of marks or grade	Class/Division
1. SSC/SSLC					
2. Higher Secondary					
3. Bachelor's Degree					
4. Master's Degree					
5. Ph.D.					
6. Additional Qualifications, if any					

a)					
b)					
c)					
7. Other Achievements, if any					
a)					
b)					

8) Work experience, starting with the most recent experience in reverse chronological order:

Sr. No	Institution	Designation	Period of Service		Scale of pay	Nature of work
			(dd/mm/yy)	(dd/mm/yy)		

(Please add an extra sheet if necessary)

9) Do you have any experience in Computer Application and/or Management Information System in educational administration?

Yes/No

If Yes, please give details:

10. Do you have knowledge/experience in handling legal matters related to educational administration?

Yes/No

If Yes, please give details:

11. Significant contributions made to previous institutions/organizations in educational administration.

12. Details about present position:

(a) Name of the Institution if employed

(b) Present designation

(c) Copy of latest salary certificate if employed.

(d) Date of appointment _____

(e) Date of next increment _____

13) Name, designation and address of persons who have given testimonials (attach minimum two testimonials):

14) Name, designation and addresses of not more than three persons to whom references may be made.

I hereby declare that all statements made by me in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false, incomplete or incorrect, my candidature / appointment is liable to be cancelled / terminated. I further understand that no notice shall be taken of any request for withdrawal of my application.

Place: _____

(Signature of candidate)

Date: _____

Forwarded through the Registrar / Principal / Director of the University / College/
Institution where employed.

Place:

Signature and Seal

Date: