SHORT TERM CLINICAL ASSISTANTSHIP FOR BDS GRADUATES

Aim - To provide opportunity for Clinical Assistance in different Dental Specialties.

Vacancy - 10(Ten) seats for four months period only.

Eligibility -
    i/ Must have passed BDS from Dental Institute recognized by DCI.
    ii/ Registered with State Dental Council

Fee for Assistantship - Rs. 25000/- per month for four months. The entire fee amount has to be paid in advance. The fee once paid is not refundable.

Guidelines -
    i/ Selection would be strictly on the basis of percentage of total marks obtained in BDS Examinations (all 4 years) and performance during interview.
    ii/ Maximum period of Assistantship shall be 4 months only and will not be extended.
    iii/ Candidates can choose specialties of Assistantship of his/her own CHOICE in maximum two clinical subjects. **This is subject to award of specialty during counseling, as per merit. The selected candidate will be offered Clinical Assistantship in only two Subjects (for 2 months in each subject)**
    iv/ No Hostel accommodation will be provided.
    v/ No honorarium shall be paid to the selected candidates during the period of Clinical Assistantship.
    vi/ The candidates shall have no claim of employment (Permanent or contractual) at Jamia Millia Islamia.
    vii/ It is binding on the selected candidates to follow the rules & regulations of Jamia Millia Islamia. The Clinical Assistantship may be terminated in case of breach of any regulation laid down in Act, Statutes & Ordinances of Jamia Millia Islamia.
    viii/ The decision of the Competent Authority of JMI shall be final.

Interested candidates may apply on prescribed format with following documents:

i/ Self attested copies of Mark Sheet of I,II,III & IV year of BDS.
ii/ Self attested copy of Certificate regarding completion of Internship.
iii/ Proof of residence (Passport/VoterI-Card/Aadhar Card) (self attested copy).
iv/ Registration with State Dental Council (Self attested copy).
v/ Any other relevant testimonials/ documents including merit certificates/medals etc.

**NOTE:** The last date for submission of complete Application Form in the office of the Dean, Faculty of Dentistry is **18.11.2019.** Interview of shortlisted candidates will be held on **25.11.2019** at **11:00 AM** at the venue. Thereafter, the late comers will not be entertained. The list of selected candidates will be displayed on the University's website (www.jmi.ac.in) &/ or on Notice Board of Faculty of Dentistry. No separate interview letter will be sent.

-Sd-
Registrar,
JMI
Clinical Assistantship

REVISED SCHEDULE

Opening date
Monday 11th November, 2019

Last date for submission of Application Form
Monday, 18th November, 2019 upto 4:00 P.M.

Display of list of shortlisted Candidates on Jamia website & Notice Board of Faculty of Dentistry
Wednesday, 20th November, 2019 after 5:00 P.M.

Date & Time of Interview
Monday, 25th November, 2019 at 11:00 A.M.

Venue
Conference Room, Faculty of Dentistry, JMI

Display of list of selected candidates on Jamia website & Notice Board of Faculty of Dentistry
Tuesday, 26th November, 2019

Counselling for allotment of specialties
Thursday, 28th November, 2019 at 11:00 AM

Commencement of Clinical Assistantship
Monday, 2nd December, 2019
FACULTY OF DENTISTRY
JAMIA MILLIA ISLAMIA (A Central University)
MAULANA MOHAMMAD ALI JAUHAR MARG, NEW DELHI-110025
(TEL No.: 011-26982006, Extn. No. 500, 501, Fax. 011-26982006
(Email- fdn@jmi.ac.in)

(APPLICATION FOR CLINICAL ASSITANTSHIP)

(FOR THE PERIOD 01st December, 2019 to 31st March, 2020)
(Forms to be filled in by candidate in his/her own hand writing in Block letters)

1. Full Name of the Applicant: ____________________________
   (IN BLOCK LETTERS)

2. Sex: ____________________________

3. Father’s/ Husband’s Name: ____________________________

4. Address: ____________________________________________

5. Phone No.: Resi. _______________ Mob. ________________

6. Nationality: __________________________________________

7. Date of Birth: _________________________________________

8. Marital Status: _________________________________________

9. **Academic Qualifications** :-

<table>
<thead>
<tr>
<th>Examination passed (BDS)</th>
<th>Board/ university</th>
<th>Name of college</th>
<th>Year of passing</th>
<th>Year</th>
<th>Max. Marks</th>
<th>Marks obtained</th>
<th>Percentage</th>
<th>No. Of attempts in passing BDS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1st Year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>II Year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>III Year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IV Year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
09. Date of Internship completion

10. Date of registration with state Dental Council

11. In order of preference, please mark all choices as 1 to 9 in the specialties mentioned below:-

- Oral Surgery
- Prosthodontics
- Conservative Dentistry
- Orthodontics
- Pedodontics
- Periodontics
- Oral Medicine & Radiology
- Public Health Dentistry
- Oral Pathology

12. Fees for Assistantship: Rs. 1,00,000/- (Rupees One Lakh only) For 04 months Fee is not refundable

13. Enclosed all requisite documents/ Certificate along with application.
   a. Copies of Mark sheets of 1st, 2nd, 3rd, and 4th year of BDS.
   b. 10th Certificate for age proof.
   c. Internship Completion Certificate.
   e. Certificate, Medals, Honours, Conference attended, Papers Presentation and Poster etc. (Attach extra sheet if necessary).
   f. Registration certificate with State Dental Council.

SIGNATURE OF THE CANDIDATE

NAME IN BLOCK LETTER: __________________________