GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI
OFFICE OF THE MEDICAL SUPERINTENDENT
BHAGWAN MAHAVIR HOSPITAL
H-4/5, PITAMPURA, DELHI-110034.

No. F3(213)/2017/ BMH/SR-JR/Dental/ PF-2 8834-36 Dated- 8/9/2026

NOTICE

Subject:- Recruitment for the post of Dental, Senior Resident (Oral & Maxillofacial Surgery) on adhoc basis in Bhagwan Mahavir Hospital, GNCTD, Pitampura, Delhi-34.

Applications are hereby invited for recruitment of **Senior Resident, Dental (Oral & Maxillofacial Surgery) on adhoc basis for 89 days or till the regular incumbent joins against his/her post, whichever is earlier under Residency Scheme** in Bhagwan Mahavir Hospital , Pitam Pura Delhi -110034.

Senior Resident

S.No	Name of Speciality	On Adhoc Basis
1.	**Dental (Oral & Maxillofacial Surgery)**	01 UR

The following schedule will be followed for the selection of SR, Dental (Adhoc Basis).

S.No	Schedule to be followed	Date
1	Last date for receiving application along with documents (self attested).	**12/09/2026**
2	Date of uploading the list of eligible candidates for written examination/screening test of SR dental (Adhoc Basis) on Delhi Government Website (after Screening)	**15/09/2026**
3	Date of written exam/screening test of shortlisted candidates of SR Dental (Adhoc Basis)	**17/09/2026**
4	Date of Interview of all qualified of SR Dental (Adhoc Basis)	**18/09/2026**
Result will be displayed on Delhi Government Website.		

EDUCATIONAL QUALIFICATIONS:-

For Senior Resident: - MDS degree from recognized university/institute of the speciality mentioned above. Attested copy of MDS Degree/provisional Certificate & Marks sheets of all years to be attached. The candidate must not have completed 03 years Senior Residency in any recognized institute including regular or adhoc basis. Registration with DCI/Delhi Dental Council & Applied for registration receipt for the same shall also be acceptable.

AGE LIMIT:-For S.R. -45 years for General

EMOULUMENTS:-
For SR - 67,700/- in Level-11 (Rs. 15,600-39,100 G.P 6600 pre-revised).

Tenure :-
The initial appointment is for 89 days which may be extended till 03 years on the basis of satisfactory work and conduct with one day break after completion of every 89 days tenure. **The appointment is purely on adhoc basis for 89 days or till the regular incumbent joins against his/her post, whichever is earlier.**

Registration with Dental Council of India/ Delhi Dental Council is Compulsory. Applications must be sent by Post/Individually to Room No 136, Diray Section, Ist Floor, Bhagwan Mahavir Hospital, Pitam Pura Delhi-110034 latest by 12/09/2026 up to 1.00 p.m. with the photocopy of the documents which is mentioned below, Further Candidates must bring Photograph and all the certificates/documents in original for verification at the time of interview as mentioned below :-

1. Application Form
2. Date of Birth Certificate(Xth Class)
3. DCI/DDC Registration.
4. Degree Certificate.(BDS, MDS)
5. Attempt Certificate.
6. Internship Certificate.
7. Mark-Sheets of all years.(10^{th}, 12^{th} BDS & MDS)
8. Aadhar Card/Voter Card/ Driving Licence /any valid photo I/card approved by Govt.

The candidates may note that applications received after due date and time will not be considered. Any delay in post will not be considered.

List of eligible candidate after scrutiny of the forms will be displayed on the Delhi Health Services website along with other details.

- **Application form is annexed.**

Other General conditions/Requirements:-

1. Appointment shall be subject to medical fitness and verification of educational certificate.
2. No TA/DA will be paid for appearing in the screening test/interview.

Note:- Competent Authority reserves the right to do any amendment, cancellation and changes in the advertisement.

(DR. SUMAN SINGAL)
HEAD OF OFFICE

No. F3(213)/2017/ BMH/SR-JR/Dental/ PF-2 Dated-

Copy forwarded to the following with the request to display the same on the Notice Board

1. To upload the website of H&FW Deptt. GNCT of Delhi.
2. Notice Board of B.M.H
3. P.A to M.S (For Information)

(DR. SUMAN SINGAL)
HEAD OF OFFICE

APPLICATION FORM FOR SENIOR RESIDENT(DENTAL)

Paste here duly attested Passport size Photograph

1. Name of the candidate **(in block letters)**.....
2. Father's/Husband Name.....
3. Date of Birth .....
4. Age as on (Date of interview) .....
5. Whether Belong SC/ST/OBC.....
6. Pgysicall Challenged (Yes/No).....
7. Postal Address

.....

. Permanent Address .....

.....

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8. Contact No. .....
9. Valid DMC/DDC No. .....
10. Date of completion of internship (For J.R. only).....
11. Academic Qualification .....

Qualification	Year of Passing	University/institution	% of Marks	Nos. of attempts

12. Details of Work Experience: .....

Complete Address of employer	Designation/Post held	From	To

13. All the relevant certificates should be self attested
14. Aadhar Number .....
15. **Declaration: -** I solemnly declare that the above statement made by me are correct to the best of my knowledge and noting has been concealed thereof. If any information given above is found false/incorrect my candidature/service may be terminated.

Dated:
Place:
List of encl:

(Signature of the Candidate)

Email id