CORRIGENDUM

Development Scheme No. 5064

ADVERTISEMENT FOR POST OF STAFF NURSE

Applications are invited for the vacant posts of Staff Nurses (**General- 4; OBC- 1**) with a fixed remuneration of Rs. 20,500.00 per month under National Health Mission sponsored Operationalization of Sick Newborn Care Unit (SNCU) in the Department of Pediatrics, IMS, BHU, Varanasi under the Scheme No. 5064. The post is temporary, contractual and co-terminus with the scheme.

Essential Qualification: The candidate should have Diploma in Nursing (GNM)/B.Sc. Nursing and registered with State Nursing Council. Female candidates will be preferred. The upper age limit for the post is 45 years.

Desirable qualifications: Candidate having experience of working in Newborn Care Unit for 1 year or having undergone 4 days FBNC training will be given preference.

Important Information:

- 1. The application form and other details can be obtained from the BHU website: www.bhu.ac.in.
- 2. No TA/DA will be paid for attending written exam and skill test.
- 3. Incomplete application form will not be entertained.
- 4. Candidate should fill the application form (proforma enclosed) and send the relevant documents/ certificates along with one copy of recent photograph through e-mail only.
- 5. Those who are in service should apply through proper channel.
- **6.** Degrees must be from the recognized Institution/ University.
- 7. Reservation for reserved category will be done as per University rules for the project.
- 8. Interested candidates should send their application through e-mail at seenbenupv@gmail.com by 10/05/2020, 5:00 PM.
- 9. Applications will NOT be accepted by post or by hand.
- 10. Candidates who have already applied for above post to earlier advertisement, need not apply again.
- 11. Selection will be done through a written and skill based test
- 12. The details of the examination are as follows:

Date and time of written examination: 14/05/2020, 10:00 AM

Venue of written examination: New Lecture Theatre Complex, IMS, BHU

Date of skill test: 14/05/2020, 02:00 PM

Venue of skill test: Ground Floor, NICU/SNCU, S.S. Hospital, BHU

The Candidates should bring all relevant documents and certificates on the day of examination and Skill test. Please check the BHU website: www.bhu.ac.in for regular updates.

Professor Incharge & Coordinator SNCU
Scheme no. 5064
Department of Pediatrics
Institute of Medical Sciences
Banaras Hindu University
Varanasi-221005



BANARAS HINDU UNIVERSITY

MODEL SICK NEWBORN CARE UNIT (SNCU) NEONATAL UNIT, DEPARTMENT OF PEDIATRICS INSTITUTE OF MEDICAL SCIENCES



APPLICATION FORM

Post applied for	: STAFF NURSE
Name (In Block Letters)	:
Present Designation	:
Date of Birth (dd/mm/yyyy)	:
Gender (Male/ Female)	:
Father's Name/ Husband's Name	:
Mother's Name	:
Marital Status	:
Nationality	:
Category (Gen/OBC/ SC/ ST)	:
Address for Correspondence	:
Mobile No. (mandatory)	:
Telephone No.	:
E-mail Address (mandatory)	:
Permanent Address	•
Distinction/ Prizes/ Awards/ Meda	ls/ Honors etc.:

Academic Qualifications:	Acad	emic	0	ua	lifi	cati	ons
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Examination Passed	Board/ University	Year of Passing	Percentage of Marks Obtained	Division/ Grade/ Merit
10 th / High school or				
Equivalent				
12 th / Intermediate or				
Equivalent				
B.Sc. Nursing/ GNM or				
Equivalent				
M.Sc. Nursing or Equivalent				
Special training in Newborn				
Care, for example FBNC				
Training				

Appointments held or Experience, if any:

Designation	Name of Employer/ Institution	Date of		Salary	Nature of	Reason for
		Joining	Leaving	(Grade pay/ Consolidated)	Duties	leaving

Additional Information, if any:	

- **Declaration:** I declare that:
 - 1. The information given above is complete and correct.
 - **2.** I have never been dismissed from service nor debarred from holding any future appointment or convicted for any offense. No criminal case is pending against me.
 - **3.** In case of concealment/suppression of facts(s), which may be detected at any stage in future, my appointment is liable to be cancelled/ terminated, as the case maybe, without notice.

Date	•	Signature of the Applicant	: