

CHEST CLINIC (TB)
LOK NAYAK HOSPITAL
Jawahar Lal Nehru Marg, New Delhi 110002

F.No.LNH/CC/TB/52

Date:02/02/2024

The following post is to be filled purely on temporary basis from willing eligible candidate for the below mentioned project implemented by this institute as detailed thereon.

01.	Name of the Post	Project Technician III (Field Worker)
	Name of the Project	Multi-centric cohort study of TB recurrence free cure among microbiologically confirmed new pulmonary tuberculosis patients treated under NTEP with the 4-month moxifloxacin containing daily regimen
	Place of Posting	Chest Clinic (TB), Lok Nayak Hospital, New Delhi
	Number of Post	01 (One)
	Essential Qualification	12 th Pass in Science Subject And 2 years diploma in Medical Laboratory Technician OR PMW OR 1-year DMLT plus 1 year required experience in a recognized organization. OR 2 years field/laboratory experience* in a Govt recognized organization. *B.Sc. degree shall be treated as 3 years' experience.
	Nature of Duties	<ol style="list-style-type: none">1. Will be responsible for all field related activities that include screening and enrolment of study participant, taking consent, interviewing of study participants, facilitating the required investigations, data collection and data entry.2. Ensuring retention of study participants by doing home visit/phone calls.3. Counseling the participants regarding the study procedures.4. Performing any other study related activities delegated by Study Co-Ordinator/Principal Investigator.
	Age limit	Not exceeding 30 years
	Emoluments	Consolidated salary 18,000/- p.m.
	Duration	Initially for a period of Six Months

INSTRUCTIONS TO THE CANDIDATES:

1. Bring the filled in application with one set of photocopies of qualification and experience and other testimonials.
2. The candidates should bring filled application form in the prescribed format which can be downloaded from Dean, MAM College website <https://mamc.delhi.gov.in> along with all certificates/testimonials in original for verification. Candidates are requested to bring one set of self-attested copies while attending Walk-in written test/skill test/interview. Candidates who fail to bring the Original Certificates for Walk-in written test/skill test/interview will not be considered.
3. Experience certificates should clearly state the nature of work during the period of employment.
4. TA/DA will not be paid attending the written test/interview.
5. Date of Walk-in written test/Interview may be changed due to administrative reasons. Hence candidates are advised to check website <https://mamc.delhi.gov.in> before appearing for Walk-in written test/skill test/interview.

Interested candidates fulfilling the required qualifications may download the prescribed application form from the website <https://mamc.delhi.gov.in> and walk in on 13/02/2024 at 10:00 am at **Conference Room, Chest Clinic (TB), Gate No. 2, Lok Nayak Hospital, Jawahar Lal Nehru Marg, New Delhi 110002.** The filled-in application along with self-attested copies of all credentials in support of educational qualifications, age, caste/community, and affixing a colour passport-size photograph on the application form should be carried while reporting for walk-in written test/interview. **Original Certificates of all these credentials should be also carried with for verification.**

The Dean, MAMC/Selection Committee has the right to accept/reject any application without assigning any reason thereof.

Canvassing and bringing pressure in any form for short listing, interview and employment will be a disqualification and barred from selection process.

Dean

APPLICATION FORMAT

1. Post Applied : _____
2. Name : _____
3. Father's /Spouse Name : _____
4. Mother's Name : _____
5. Address (Correspondence) : _____

6. Address (Permanent) : _____

7. Date of Birth : _____
8. Educational Qualification :

S.No	Academic Qualification	Board / University	Name of the Course/Stream	Percentage	Year of Passing	Remark if Any
1	10th					
2	12th					
3	Graduation					
4	Post Graduation					
5	Ph.D					
6	Diploma					
7	Others					

9. Details of Experience :

S.No	Date		Name of Organization	Experience in Years	Designation	Primary Job Responsibility
	From	TO				

10. Contact No.: _____

11. Email ID: _____

Declaration

I hereby solemnly declare and affirm that all the statements made in this application are true and complete and correct to the best of my knowledge and belief. I understand that in the event of any information being false / incorrect my candidature is liable to be cancelled / terminated. I shall abide by terms and conditions as prescribed.

Date :

Signature of the Candidate