# ADVERTISEMENT INVITING APPLICATION FOR CONTRACTUAL APPOINTMENT OF PERFUSIONISTS AND ECG TECHNICIANS FOR EXTRA CORPOREAL MEMBRANE OXYGENATION (ECMO) IN THE DEPARTMENT OF CTVS, SCB MCH, CUTTACK.

Sl. No.	Name of the post	No. of posts	Reservation	Salary	Eligibility criteria	
1	Perfusionist	11	As per ORV Act.	Rs.35,400/- (Level-9) of ORSP Rule-2017 An ECMO allowance of Rs.15000/- P.M. is allowed to the Perfusionists during their contractual period of 06 years.	1. Candidate must have Degree or Diploma in Perfusion Technology from a recognized University/Institute inside India.  2. Candidate must have 02 (two years) of experience from any Govt./corporate hospital inside India & preference will be given to the candidates those who have got training in ECMO Perfusion.  Career marks- 50% & Interview - 50%	
2	ECG Technician	06		Rs.25,500/- (Level-7) of ORSP Rule-2017	1. Candidate must have passed HSC/Equivalent examination & +2 Science examinations or its equivalent with 2 years Experience in any Govt. recognized hospital in ECG.  2. Desirable qualification: DCA Career mark: HSC-50%, +2-50%	

#### **GENERAL CONDITION**

- The candidates, who are intended to apply for the above noted post they have to apply to the Superintendent SCB MCH, Cuttack by E-mail to <u>scbsuperintendent@gmail.com</u>.
- 2. The mail should reach on or before **26.07.2021 by 5 P.M**. No mail shall be entertained beyond the stipulated time.
- 3. The engagement is purely temporary and shall be terminated at any time without assigning any reason thereof.
- 4. Age limit: For the post of ECG Technician as per the norms prescribed by State Govt.
- 5. The upper age limit for the post of Perfusionist is relaxed up to 45 years.
- The Superintendent, SCB MCH, Cuttack reserves the right to reject/accept//cancel any mail
  without assigning any reasons thereof, If it is found incorrect / false/incomplete.
- Self attested scanned copy of all relevant certificates, Mark sheets, Registration Certificates and Experience Certificates should be attached alongwith the application form.
- 8. Self attested scanned copy of Caste, Residence, Aadhar Card to be attached alongwith the application form.
- 9. Undertaking duly filled in and to be attached alongwith the application form.

Medical Superintendent SCB Medical College & Hospital ,Cuttack

### **Application Form**

- Name of the Candidate (IN BLOCK LETTERS):
- 2. Name of the Post applied for :
- Name of Father /Spouse:
- 4. Date of Birth ( As recorded in HSC Pass Certificate):
- 5. Caste applying for ( UR, SC, ST. SEBC) :
- 6. Email ID & Contact No.
- 7. Permanent address:
- 8. Present address of Correspondence

Affix one recent passport size photograph duly self attested

Full Signature of the Candidate

#### DECLARATION

I do hereby declare that all the information in the application form is true to the best of my knowledge and belief. Any false/ incorrect information, if detected during verification or in future, my application form shall be treated as cancelled.

Full Signature of the Candidate

## **Undertaking**

Ι	S/O,D/O, W/O			
At	Po	.PS		
Dist				

I undertake that the scanned self attested documents submitted by me through email are true to the best of my knowledge and belief and if at any stage it is found that any of the information submitted by me is false/ incorrect or any relevant information has been suppressed by me, application form for the above post is liable for rejection.

Date:

Place:

Full Signature of the Candidate

Contact No.

Email ID:-