



CHITTARANJAN NATIONAL CANCER INSTITUTE
1st Campus – 37, S. P. Mukherjee Road, Kolkata - 700 026
2nd Campus - Street No.299, Plot No. DJ – 01, Premises No. 02-0321,
Action Area ID, New Town, Kolkata – 700160

Dated : 17-03-2025

Advt. No. N-003/2025

Director CNCI, Kolkata, invites applications for fill up the following Post on Contractual Basis for CNCI with the qualification as mentioned below:-

Specialist Grade-II : Surgical Oncology (GI & GU) : Number of Positions: 1 (One)

Remuneration	Consolidated Remuneration Rs. 1,50,000/-
Essential Qualification	MCI Recognized M.Ch/DNB or equivalent qualification in Surgical Oncology. OR MS/DNB/equivalent PG degree in General Surgery with 3 years' post PG experience in Surgical Oncology. [Desirable: 1. Experience in a Comprehensive Cancer Centre/Regional Cancer Centre/Teaching Hospital (either running M.Ch/DNB/equivalent course in Surgical Oncology) or a Cancer wing in a Medical College] Desirable: 2. Additional Training or Fellowship in the specialty/Research Publication in indexed journals/Conference presentations in International/ national/State Conferences.
Age limit	Not exceeding 45 years,
Tenure	For the period of 1(One) year, which may be extended as per requirement of the Institute.
Date of Walk-in-Interview & Time	22nd March, 2025, from 11.00 A.M onwards. (The Reporting time will be at 10.00 A.M on the interview date)
Fees & Bank Details	Rs. 200/- Bank Details : Account Number – 40382089655 SBI - Sanjeeva Town(Code-16913) IFSC Code- SBIN0016913, MICR Code- 700002475
Venue of Walk-in-Interview interview	2 nd Campus of Chittaranjan National Cancer Institute , Street No. 299, Plot No. DJ-01, Premises No 02-0321, Action Area-1D, New Town, Rajarhat, Kolkata – 700160.

Director

Copy to : 1. PS for information
2. All Concerned.
3. Notice Boards.



CHITTARANJAN NATIONAL CANCER INSTITUTE

(An Autonomous Institute under Ministry of Health and Family Welfare, Govt. of India)

[Application form for the positions of Specialist Grade-II Surgical Oncology (GI & GU)]

1.	Name of the position applied for & the Advt. No.				
2.	Name of the Candidate (in BLOCK CAPITAL)				
3.	Father's / Husband's Name				
4.	Address for communication, in full with telephone number, email, etc.				
5.	Date of Birth *				
6.	Whether belonging to SC/ST/OBC *				
7.	Academic qualifications *				
Sl. No.	Degree / Diploma	Year	University / Institute	Division / Grade	Chance (for medical personnel only)
8.	MCI Registration No. (for medical personnel only) * Whether NET / GATE qualified (for research fellowship only) *				

* Attach self authenticated certificates wherever required.

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9.	List of publications, if any (kindly attach additional sheet, if required)	
10.	Experience, if any (kindly attach additional sheet, if required)	
11.	Present status (kindly attach additional sheet, if required)	

I hereby declare that the information given above is true and complete to the best of my knowledge and belief.

Dated :

(Signature of the Candidate)

List of enclosures :

- 1.
- 2.
- 3.
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- 5.
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