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 : 21-11-2026

Advt. No. N-035/2026

Director CNCI, Kolkata, invites applications for fill up the following Post for CNCI 2nd Campus with the qualification as mentioned below:-

Number of Positions : 1(One)

Name of the Post : Senior Resident in the Department of Surgical Oncology (Head and Neck Oncology)

Pay	Consolidated salary as per norms.
Essential Qualification	i) A recognized Medical Qualification included in the first or second schedule or Part-II of the third schedule (other than licentiate qualification) to the Indian Medical Council Act. 1965. Holders of educational qualifications included in Part-II of the Third schedule should also fulfill the conditions stipulated in sub-section (3) of sections (13) of the Indian Medical Council Act, 1965. (ii) A Post Graduate degree in the respective discipline from recognised university and must produce MCI registration certificate for the same at the time of joining. ***** Candidates having experience in respective department will be preferred.
Age limit	**37 years**
Tenure	for **a Period of 44 Days**. Can be extended on less than 45 days basis subject to satisfactory performance work and conduct report from concerned HOD.

Date of Walk-in-interview & Time	**28th November, 2026, from 01.00 P.M onwards.** (The Reporting time will be at 12.00 P.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	2nd 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 Senior Resident]

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.*

Cont. 2

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 :

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