

# INSTITUTE OF HUMAN BEHAVIOUR & ALLIED SCIENCES (IHBAS)



Hospital based autonomous academic Institute, under  
Government of National Capital Territory of Delhi dealing with  
"Brain- Mind Problems & Their Solutions"  
Dilshad Garden, Delhi 110 095 (India)



Tel.: 22597750, E-mail: [jda-ihbas@delhi.gov.in](mailto:jda-ihbas@delhi.gov.in) Website: [www.ihbas.delhi.gov.in](http://www.ihbas.delhi.gov.in)

Dated: 09/04/2025

No. F.2/622/2025/Estt./IHBAS/

## RECRUITMENT NOTICE

### WALK-IN-INTERVIEW FOR THE POST OF SENIOR RESIDENT/JUNIOR RESIDENT IN VARIOUS DEPARTMENTS IN IHBAS ON ADHOC BASIS FOR 44 DAYS

Walk in Interview will be held on **12<sup>th</sup> April 2025** in the Chamber of Director, IHBAS for filling up the Senior Resident/Junior Resident posts in the following departments on Ad-hoc Basis. Receiving of Application and verification of certificates will be held **from 09.00 AM to 10:00 AM** on the date of interview in the **Activity Room, Academic Block, IHBAS, Dilshad Garden, Delhi**

#### Senior Resident

Sl.	Name of Post	Number of Post
1	Senior Resident (Microbiology)	02 (UR: 01; SC: 01)
2	Senior Resident (Neuro-psychopharmacology)	03 (SC: 01, OBC: 02)
3	Senior Resident (Neurosurgery)	04 (UR: 02, ST:01, OBC: 01)
4	Senior Resident (Neuro-radiology)	02 (SC: 01, EWS: 01)
5	Senior Resident (Psychiatry)	04 (UR:01; SC:01; OBC:01; ST:01)
6	Senior Resident (Neuro-anesthesia)	04 (UR: 01, SC: 01, OBC: 01; EWS:01)
7	Senior Resident (Emergency Laboratory)	03 (UR: 1, OBC: 01; EWS: 01)

#### Junior Resident

Sl.	Name of Post	Number of Post
8	Junior Resident (Neuro-anesthesia)	02 (UR:02)
9	Junior Resident (Neurology)	05 (UR:02; SC:01; OBC:02)
10	Junior Resident (Psychiatry)	02 (SC:01; EWS:01)
11	Junior Resident (Neurosurgery)	01 (SC:01)

#### For Senior Resident (Pay Matrix Level-11; Rs.67700-208700)

**Qualification:** For S.No. 1 to 6; Recognized Post Graduate Degree/Diploma (MD/MS/DNB) in the concerned specialty.  
For S.No.7 SR Emergency Laboratory: Recognized Post Graduate Degree (MD) in Pathology/Microbiology/Biochemistry /Laboratory Medicine)

#### For Junior Resident (Pay Matrix Level-10; 56100-177500)

**Qualification:** For S.No.8 to 11; MBBS or equivalent degree from MCI recognized institution/Medical College.

**Age:** (i) For Sl. No. 1 to 7 [Senior Resident] Upper age limit is 45 Years (relaxable for SC/ST/OBC/PwD as per rule).

(ii) For Sl. No. 8 to 11 [Junior Resident] 30 years, relaxation for SC/ST/OBC/PwD as per rule.

**Internship:** Candidates who have completed internship before **12<sup>th</sup> April, 2023** i.e. two years elapsed after completion of internship are not eligible to participate in Walk-in-Interview for the post of Junior Resident.

#### General Instructions

- The eligible and desirous candidates fulfilling educational qualifications/eligibility conditions should appear for a Walk-in-interview with the application along with Original certificates and one set of self-attested photocopies of the relevant documents in support of Age, Qualification, Attempts, Mark-sheet, Degree, DMC Registration, Category OBC & EWS applicants in the shape of demand draft (non-refundable) issued in favour of 'Director, IHBAS; payable at Delhi to be issued after the date of publication of this Advertisement. The SC/ST/PwDs applicants are exempted from payment of Fee.

2. The Director, IHBAS reserves the right of any amendment, cancellation and changes of this advertisement whole or in part without assigning any reason.
3. Application form and other information may be downloaded/viewed from our official Website ([www.ihbas.delhi.gov.in](http://www.ihbas.delhi.gov.in))
4. **Vacancies may vary as per vacancy position prevailing on date of Walk-in-interview.** The above posts advertised include anticipated vacancy also. In the event of insufficient representation from the reserved categories post, due to exigency of services in the department in public interest, the remaining reserved category posts will be filled up from Unreserved/any other category on emergency basis initially for a period of less than 45 days or till the concerned reserved category Junior Resident or till the regular Junior Resident, joins in the Department, whichever is earlier.
5. Enclosures as mentioned here under are to be attached with the applications:
  - (i) Date of birth certificate (X- standard board passing certificate)
  - (ii) MD/MS/DNB/Diploma certificate along with the marksheet
  - (iii) MBBS certificate along with mark sheets
  - (iv) Attempt certificate
  - (v) Internship completion certificate
  - (vi) Delhi Medical Council registration certificate
  - (vii) Experience certificates, if any
  - (viii) Caste certificate, if any
  - (ix) Valid Income & Assets certificate in case of EWS category
6. **OBC candidates of Delhi are only eligible for reservation and required to submit their caste certificate (issued on or before the date of interview) by the Competent Authority of GNCT of Delhi. In case of SC/ST/OBC/EWS/PH category, the applicant should be in possession of appropriate certificate issued by competent authority.**
7. Income & Asset certificate issued from the authorities as per O.M. No. 36039/1/2019-Estt (Res) dated 31.01.2019 issued by DoPT, Ministry of Personnel, Public Grievances & Pensions, Govt. of India shall be accepted.
8. List of the selected candidates will be displayed on the notice board as well as website of IHBAS Hospital.
9. Appointment will be subject to medical fitness and verification of all the relevant certificates of Education Qualification/Age/Caste/DMC registration etc. The selected candidates will report for duty within the period of 05 days from the date of issue of offer of appointment.
10. Any type of discrepancy may invite cancellation of appointment and legal action as per the rules.
11. **The applicant must report in the Activity Room, Academic Block, IHBAS Hospital, Dilshad Garden, Delhi-110 095 on the date of interview (12.04.2025) between 9:00 AM to 10:00 AM. The cut-off date for age, qualification, experience and will be the date of interview.**
12. Candidate applying for the post mentioned in the advertisement may enclose a **Demand Draft/Pay Order for Rs.500/- in favour of Director, IHBAS, Delhi.** The fee is non-refundable. No fee is to be paid by SC/ST/PwD candidates.
13. In case of large number of applicants, Institute reserves the right to short-list applicants in any manner as may be considered appropriate and no reason for rejection shall be communicated.
14. No TA/DA shall be payable to applicant for any journey performed for attending the interview.
15. The application form shall be summarily rejected in case it is found incomplete in any respect or is not accompanied by fee of appropriate value described above.
16. Institute reserves the right to increase/decrease, fill or not fill any/all the vacancies.
17. Upper age limit is relaxable up to 05 years Scheduled Caste and Scheduled Tribe, 03 years for OBC and 10 years for PwD candidates.
18. Canvassing in any form will disqualify the candidate.

**Joint Director (Admn.)**

### MENTAL ILLNESSES ARE TREATABLE

**Copy to:**

1. OIC (IT), IHBAS with a request to upload this Recruitment Notice and Application Format on the website of IHBAS.
2. Notice Board



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(Hospital based autonomous academic Institute, under  
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Dilshad Garden, Delhi-110 095 (India)

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Application form for the post of Sr. Resident/Jr. Resident in the Department of \_\_\_\_\_ on Adhoc basis  
Pay Order/DD No/ UPI Ref. No. \_\_\_\_\_

Date \_\_\_\_\_

1. Full Name (IN BLOCK LETTERS) \_\_\_\_\_

2. Father's/Husband's Name \_\_\_\_\_

3. Date of birth \_\_\_\_\_

4. Permanent Address: \_\_\_\_\_  
\_\_\_\_\_

5. Correspondence Address: \_\_\_\_\_  
\_\_\_\_\_

6. Contact No & e-mail \_\_\_\_\_

7. MCI/Delhi Medical Council Registration No. \_\_\_\_\_

## 8. Academic Qualifications:

Examination Passed	Division/% of marks	Board/University	Year of Passing	Subject Taken	No. of attempt

9. Sex: Male ☐ Female ☐

10. Marital Status: Married ☐ Unmarried ☐

11. Category: General ☐ OBC ☐ SC ☐ ST ☐ PWD ☐ EWS ☐

12. Date of completion of internship \_\_\_\_\_

13. Senior/Junior-Residency done if any (Name, Institution and Duration):  
\_\_\_\_\_

\* Attach separate sheet if space is not sufficient.

I certify that the information provided above is true. In case of any false information, the application will be rejected.

Place:

Date:

Please Note: -

Enclose: Self attested photocopy of the certificates

Signature of the Applicant

Recent  
Passport Size  
Photograph