



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 : 30.03.2023

Advt. No. N-229/2023

Director CNCI, Kolkata, invites applications for filling up the following 1(One) post of **Medical Officers in Haemato-Oncology** for a period of 1 year for Hospital Unit of CNCI 2nd Campus

Post : Medical Officers in Haemato-Oncology

Number of Positions: 1(One)

Remuneration	Consolidated salary Rs. 95000/-
Qualification	MBBS with experience in Haemato-Oncology
Age limit	40 years
Tenure	For the Period of 1(One) year, which may be extended as per requirement of the Institute.
Date of Interview & Time	03rd April, 2023 from 12.30 P.M
Venue	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
Fees & Bank Details	Rs. 200/- Bank Details : Account Number – 40382089655 SBI - Sanjeeva Town(Code-16913) IFSC Code- SBIN0016913, MICR Code- 700002475

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)

RECENT
PASSPORT
SIZE PHOTO

[Application form for the positions of Medical Officers in Haemato-Oncology]

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



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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.
- 4.
- 5.
- 6.
- 7.
- 8.