

Kalyan Singh Super Specialty Cancer Institute

कल्याण सिंह अति विशिष्ट कैंसर संस्थान

C.G. City, Sultanpur Road, Lucknow-226002

सी0जी0 सिटी, सुल्तानपुर रोड, लखनऊ-226002

(An Autonomous Institute of the Govt. of Uttar Pradesh)

(उत्तर प्रदेश सरकार का स्वायत्तशासी संस्थान)

Executive Registrar Office

E-mail: executiveregistrar.ksssci@gmail.com

Ref:-KSSSCI/ ER / 120-D /599 /2026

Date: 15/04/2026

Notification

Recruitment for Junior Resident (NA)

Through Walk-in-interview

Applicants are invited for vacant post of Junior Resident (NA) for Short- Term recruitment. The details are as below: -

| | | |
|---------------------------------|---|----------------------------------|
| Date of Interview | : | 17 th April, 2026 |
| Reporting Time | : | 09.30 AM |
| Walk-in-interview starting time | : | 11:00 AM |
| Venue | : | Admin. Block at KSSSCI, Lucknow. |

Details of available seats (Seat Matrix)

| Sr. No | Posts | Vacant posts | | | | | | Qualification |
|--------|-----------------|----------------------|----|-----|----|----|-----|-------------------------------------|
| | | Bifurcation of Posts | | | | | | |
| | | Total | UR | OBC | SC | ST | EWS | |
| 1. | Junior Resident | 18 | 06 | 04 | 08 | 00 | 00 | MBBS from MCI recognized institute. |
| | | 18 | 06 | 04 | 08 | 00 | 00 | |

General Information:

- Tenure:** - The appointment is for tenure of 89 days' period. This appointment will not vest any right to claim by the candidate for regular appointment or permanent absorption in the institute OR for continued contractual appointment which may be renewed or terminated as decided by the Institute.
- Expiry of Appointment:** - The contract will automatically expire on completion of 89 days. The contractual appointment can be terminated at any time by the Institute without notice period. The employee can also leave the Institute by giving 15 days' notice or salary in lieu thereof. Renewal of contract will be at the absolute discretion of Director, KSSSCI.
- The services of residents may be terminated without notice period if the bonded candidates from DGME are joining the Institute. The decision of termination in his regard will be at the absolute discretion of Director, KSSSCI.**
- Please fill in the attached application form legibly, make online payment and mention the amount & date on the application form & enclose receipt.
- The applicants are advised to bring their filled application form as prescribed along with the self-attested photocopies and original documents for verification.
- Upper age limit as on date of interview: JR-45 Yrs. (Age relaxation to SC/ST/OBC/Govt. servants/other categories as per UP Government rules/DoPT rules).
- Benefit of reservation/ age relaxation shall be given only to candidates having domicile of Uttar Pradesh.
- Reporting time for Interviews is 09:30 AM.** No candidate will be allowed to appear for the interview, if he/she reports for the interview after 11:00AM on the day of interview.

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9. Pay & allowances as per 7th Pay commission as per State Govt. / institute rules.
 1. Junior Resident initial Pay Rs. 56,100/- in the pay matrix Rs. 56,100-1,77,500, Level-10.
10. Interested candidates are required to visit the institute's website- <https://cancerinstitute.edu.in/> for details or contact at executiveregistrar.ksssci@gmail.com
11. Fill the application form that follows and bring along the annexures at the time of interview. The Candidates are required to **make payment of requisite fee (non-refundable), Rs. 500/- (Rs. Five Hundred only) by RTGS/NEFT, remittance to the Account No. 37868945001, Name of Account: 'Director, SSCI&H, Academic Account', Name of Bank and Branch: State Bank of India, SGPGIMS, Raebareli Road, Lucknow, IFSC Code: SBIN0007789.** The receipt of payment is to be enclosed with the application.
12. Please bring three recent passport size photographs.
13. Candidate should be registered with Medical Council / Dental Council of U.P.
14. Xerox copies of all relevant certificates and testimonials should be attached in the application form.
15. Original copies of all relevant certificates & testimonials should be available for verification at the time of interview.
16. **Positions of Residents listed are indicative only, can increase or decrease at the time of interview without notice and will be filled as and when the services are initiated or expanded.**
17. **Self-attested photo copy of the Caste Certificate for OBC issued within last 6 month should be attached along with the application form.**
18. **In case no EWS candidate is found suitable/apply then candidate in UR category will be considered.**
19. Results will be declared on the Institute website (https://cancerinstitute.edu.in). The appointment letter will be issued by the Institute to the selected candidates via E-mail.
20. Director reserve the right to cancel the advertisement at any given point of time without assigning any reason thereof.
21. If employed in other organization, the applicants should bring "No Objection Certificate" from the competent authority of their organization at the time of interview.

Other Terms and Conditions:

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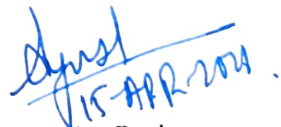
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4. Remuneration: The appointment will entitle the appointee to remuneration as mentioned.
5. Leave: - The leave entitlement of the appointee shall be governed by the Institute's leave rules as amended from time to time.
6. The Competent Authority reserves the right to change the number of vacancies, withdraw the process in full or in part and also the right to reject any or all application is received without assigning any reasons or giving notice etc.
7. The prescribed qualification is minimum requirement and mere possessing the same does not entitle any candidate for selection.
8. This appointment is whole time and private practice of every kind is prohibited.
9. He/She will have to work in shifts and can be posted at any place in the institute.
10. He/She should also note that he/she will have to conform to the rules of discipline and conduct as applicable to the Institute employees.
11. No travelling or other allowances will be paid to the candidate for joining the post.
12. The candidate should not have been convicted by any court of law.
13. Canvassing in any form will render the candidate disqualified for the post.
14. If any declaration given or information furnished by the candidate proves to be false or if the candidate is found to have wilfully suppressed any material information, he/she will be liable to be removed from services or any other action as the appointing authority may deem fit.
15. The decision of the competent authority regarding selection of the candidate will be final and no representations will be entertained in this regard. The decision of the committee shall be final and binding.
16. The Institute will terminate his/her services if She/he indulges/ takes part in any unlawful strike or agitation that is likely to affect patient care.
17. Certificate of medical fitness from a Medical board as designated by the Institute is mandatory before joining the post.
18. She/he will be required to stay in campus accommodation if it is provided.
19. If it is subsequently found that she was in service and had concealed this fact and had not submitted a no-objection certificate, his/her appointment would be liable to automatic cancellation at any stage.

Note: Candidates who do not produce the above mentioned original documents at the time of interview will not be considered for selection.


15-APR-2024
Executive Registrar
KSSSCI, Lucknow

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Documents to be attached with the application form:

1. Copy of RTGS / NEFT in original / computer print outs
2. Self-certified copy of
 - a. ID Proof (Any one- PAN card; Passport; DL; Voter ID card; Aadhaar card etc)
 - b. Address proof: (Any one- Passport; DL; Voter ID card; Aadhaar card etc)
 - c. Matriculation certificate/ age proof or any authentic age proof certificate.
 - d. Three recent passport size photos, facing the camera, face fully visible
 - e. Class 10th and 12th certificates
 - f. MBBS/BDS/MHA mark sheet/degree and pass certificate; internship completion certificate & MCI/DCI/ State Medical Council registration proof.
 - g. Attempt certificate.
 - h. Certificate/Proof of MHA degree recognition by MCI/DCI.
 - i. Evidence of work experience
 - j. Reservation category certificate from competent authority.

Candidate needs to produce the above-mentioned documents in original at the time of the interview, in the absence of which she/he will NOT be considered.

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Application form for Junior Resident (NA)

Paste Self
Signed

Passport Size

Photograph

Post applied for

| | | | | | | |
|--|-------------------------------------|--|--------------------------------|------|------------------|----------|
| RTGS payment amount and date (enclose receipt) | | Signature of Candidate | | | | |
| 1. | First Name | Middle Name | Surname | | | |
| 2. | Mother's Name | Fathers' Name | | | | |
| 3. | Date of Birth (DD/MM/YY) | | Age as on date of application | | | |
| 4. | Gender: Male/Female/Transgender | Marital Status (Single, Married, Widow, Divorced, Separated) | | | | |
| 5. | Aadhaar No | PAN Number | | | | |
| 6. | Mailing address | Phone: | | | | |
| | | Mobile: | | | | |
| | | E-Mail: | | | | |
| 7. | Permanent address | Phone: | | | | |
| | | Mobile: | | | | |
| | | E-Mail: | | | | |
| 8. | Category (SC=1, ST=2, OBC=3, Gen=4) | | | | | |
| 9. | State of Domicile | | | | | |
| 10. | MBBS/BDS Registration Number | Date | Name of Medical/Dental Council | | | |
| 11. | Academic Qualification | | | | | |
| | Examination Passed | Institution | Subject | Year | % Marks/Division | Attempts |
| A | Matriculation | | | | | |
| B | MBBS / BDS | | | | | |
| C | MHA | | | | | |
| D | MD/MS | | | | | |
| E | Others | | | | | |

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| | | | | | |
|------|---|-------------|------------------------------------|------|----|
| 12 | MBBS/BDS/MHA degree recognition status : Yes / No | | | | |
| | | | | | |
| 13 | Employment details | | | | |
| S.L. | Post Held | Institution | University/Organization/ Institute | From | To |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Only if currently employed, get your application forwarded by the head of the institution (competent authority) as under OR attach a 'No Objection Certificate':

Certified that undersigned has no objection in forwarding the application of Dr.....

Dated.....

Signature & Seal of Head of Institution

Miscellaneous information

1. Existing Bank account details: Name of Bank

A/C Number

IFSC

2. Immunization status for Hepatitis B:

Declaration

I, hereby declare that all statements made in the application are true, complete and correct to the best of my knowledge and belief. I, solemnly affirm that if any material fact has been suppressed by me, my candidature shall stand immediately cancelled without any notice. In this matter decision of the admitting Institute shall be final and binding on me.

Place & Date

Signature of the Candidate