



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

Dated : 12-06-2025

**Advt. No. N-011/2025**

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

**Senior Resident: Number of Post : 03(Three)**

**1. Senior Resident : 1(One) Post in Radiology**

**2. Senior Resident : 1(One) Post in Surgical Oncology (Gynaecology)**

**3. Senior Resident : 1(One) Post in Surgical Oncology (GI & GU)**

Pay	Consolidated salary as per norms.
Essential Qualification	<p>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.</p> <p>(ii) A post graduate degree/Diploma in the respective discipline from recognised university and must produce MCI registration certificate for the same at the time of joining.</p> <p>* Candidates having experience in respective department will be preferred.</p>
Age limit	<b>45 years</b>
Tenure	for a <b>Period of 44 Days</b> . 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	<b>23<sup>rd</sup> June, 2025, from 11.00 A.M onwards.</b>
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	2 <sup>nd</sup> Campus of <b>Chittaranjan National Cancer Institute</b> , Street No. 299, Plot No. DJ-01, Premises No 02-0321, Action Area-ID, 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 :

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.