

पेट्रोलियम एवं प्राकृतिक गैस विनियामक बोर्ड Petroleum and Natural Gas Regulatory Board

ई-400, चतुर्थ तल, टावर-ई, वर्ल्ड ट्रेड सेंटर, नौरोजी नगर, नई दिल्ली-110 029

E-400, 4th Floor, Tower-E, World Trade Centre, Nauroji Nagar, New Delhi-110029.

Dated: 08/10/2025

No. PNGRB/Admin/12-HR(28)/2024/312

PUBLIC NOTICE

Petroleum and Natural Gas Regulatory Board (PNGRB) intends to engage a part-time Medical Professional having suitable qualification and experience, as per following details:

Post	Number of vacancies	Minimum essential qualification required	Number of visits and duration
Part-time Medical Professional	01	Possessing Medical Council of India recognized MBBS degree with minimum of five years of post-qualification experience (preferable in Central/ State Government, renowned Medical Institutions/ Private Hospitals etc.)	duration of two hours, limited to four visits of two

- 2. Terms and conditions for engagement as part-time Medical Professional are as under:
- (a) **Registration:** Candidates applying for engagement as part-time Medical Professional should be registered with Medical Council of India.
- (b) Scope of service: One visit per week for a duration of two hours, limited to four visits per month.
- (c) **Period of Appointment:** For an initial period of one year, extendable on mutual consent for further periods based on the requirement and satisfactory performance. However, the total period of engagement will not exceed beyond **two/three** years from the date of engagement under any circumstances.
- (d) Consolidated fees & conveyance charges: Consolidated fees of ₹4,000/- (Rupees Four thousand only) per visit for a duration of two hours in a week, limited to ₹16,000/- (Rupees Sixteen thousand only) in a month for four visits and conveyance charges of ₹3,000/- (Rupees Three thousand only) per visit will be payable, limited to ₹12,000/- (Rupees Twelve thousand only) for four visits in a month. In addition to consolidated fees and conveyance charges, no other allowance of any kind or charges will be paid. Further, the aforesaid consolidated fees and conveyance charges shall remain fixed during the entire period of engagement.
- (e) **Nature of engagement:** Engagement will be purely on part-time, temporary in nature & on contract basis for a specified period as stated above and will not bestow upon him/her any claim for regular appointment/ employment in PNGRB.
- (f) **Termination:** PNGRB reserves the right to terminate or curtail the engagement period at any time without assigning any reason.

- (g) **Place of service:** PNGRB, E-400, 4th Floor, Tower-E, World Trade Center, Nauroji Nagar, New Delhi-110029.
- **3.** The application in the prescribed format (**Annexure-I**), along with self-attested copies of documents in support of qualifications and experience may be forwarded within **21 days** from the date of publication of this Public Notice in local leading '**Newspaper**' by Registered/ Speed Post/ Courier or by hand **OR** through email at <u>career@pngrb.gov.in</u> duly followed by a hard copy (mandatory).

Director (Admin. & HR)

Petroleum and Natural Gas Regulatory Board (PNGRB), E-400, 4th Floor, Tower-E, World Trade Center, Nauroji Nagar, **NEW DELHI-110029**.

The envelop should be super scribed as "Application for engagement as "Medical Professional" against Public Notice dated 08//10/2025."

(Pawan Kumar Uniyal)

Lt Col

Director (Admin & HR)

PETROLEUM AND NATURAL GAS REGULATORY BOARD

APPLICATION FOR ENGAGEMENT AS PART-TIME "MEDICAL PROFESSIONAL" (PUBLIC NOTICE DATED 08/10/2025)

1.	Name of ann	licant (In block letter)				
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3.	Dispensary/PIN code	Clinic address with	:			
4.	MCI Registra	ation Number	:		·	
5.	E-mail ID		•			
6.	Phone Numb	per	: Landline:	N	Mobile:	
7.	Date of birth		:	***		
8.	Educational &	& Professional Qualifi	cations:			
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Note:	Self certified co	 opies of marks and certi	 ificates to be attached	<u> </u>	L	

Details of employment in chronological order:

Name of the	Position (s) held	Period of service		Institution type (Private/ Government/ PSU or	Whether experience is recognized by MCI	
Institution	neid	From	То	other (please specify)		

Note: Self certified copies of employment details to be attached.

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10.	Training:
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Date:

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	signature, if the space	e delow is i				
2.	References:					
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13.	Any other information	on which th	e applicant v	vould like to bring int	o account for considerin	
	his/ her application:		, * *			
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Note: All fields of the application must be filled. Enclose a separate sheet, if space for any field is insufficient.