## **Department of Pediatrics**

## Vardhaman Mahavir Medical College and Safdarjung Hospital, Ansari Nagar West, New Delhi-110029

# VACANCY NOTIFICATION FOR CONTRACTUAL POSTS

Online applications are invited in the prescribed format up to 12.08.2025 for filling up the following temporary posts in the.... funded project entitled "Title: Efficacy of low dose, short course prednisolone regimen for relapse of steroid sensitive nephrotic syndrome in children" on contractual basis for a period of one year on purely contractual basis, at Department of Pediatrics, as per the details provided below. After a screening of applications, only shortlisted applicants will be called for an interview. The posts are purely temporary on a contractual basis and co-terminus with the project.

S no.	Title	Age limit and qualification	Salary
1.	Project nurse III (one Post)	30 years Diploma in Nursing or Midwifery (GNM) registered with state nursing council or B Sc. in Nursing	@Rs. 31,500/- p.m.
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#### How to apply:

- Interested and eligible candidates can send their applications latest by 12.08.2025 in the prescribed proforma by 4.pm
- 2. Apply with a detailed bio-data in the format provided in this E mail paediatricsdepartment@gmail.com form with attachments at required places.

### Terms and Conditions:

- 1. Department of Pediatrics, Safdarjung hospital, reserves the right to shortlist the candidates in case of receipt of a large number of applications.
- 2. Only shortlisted candidates will be intimated by e-mail regarding the date and time of the interview.
- 3. All candidates must bring their 2-passport size photo, CV, original certificates, letter of

#### **Application Form**

Project Title: Efficacy of low dose, short course prednisolone regimen for relapse of steroid sensitive nephrotic syndrome in children: A multi-center, randomized, placebo-controlled trial

Post	app	lied	for:	Staff	Nurse
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- 1. Full Name in Block letters-
- 2. Guardian/Spouse Name
- 3. Date of Birth
- 4. Age:
- 5. Gender
- 6. Permanent Address:
- 7. Present Address
- 8. Contact No:
- 9. Email ID

SI No:	Degree	% of marks	Year of Passing	Board/University
		× 8		*,

#### 10. Details of Qualification:

SI No:	Designation	Name of Institute	From (date)- To (date)
*		.*	

#### 11. Details of Experience:

# 12. Attach Date of Birth Document/Qualification/Experience/any other important info. (attach as annexure)

#### **Declaration**

I hereby declare that the information given above is true and correct to the best of my knowledge. In the event of any information being found incorrect/false, my candidature/services are liable to be terminated.

terminated.				
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Place:				
	ad r e			
Date:			Signatur	e of the candidate
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