

**NOTIFICATION FOR SENIOR RESIDENT SPECIALIST POSTINGS  
FOR POSTGRADUATES (2018–2019)**

1. The candidates must download the application form from the DME,A.P. website <http://dme.ap.nic.in> and get it attested by the concerned Principal. They must submit 3 copies of the attested application forms in person at the time of counselling.
2. The venue of counselling: Siddhartha Medical College, Vijayawada, A.P.
3. **The counselling Schedule is on 27-06-2018(Wednesday)**

| Time              | Hall-1   | Hall-2          | Hall-3                      |
|-------------------|--|-----------------|-----------------------------|
| 9.AM to 11.30 AM  | General Medicine   | General Surgery | OB&GYN                      |
| 11.30 to 1.30 PM  | Pulmonary Medicine   | Anaesthesia     | Paediatrics                 |
| LUNCH BREAK       |  |                 |                             |
| 2.00PM to 3.00PM  | Ophthalmology  | Orthopaedics    | ENT                         |
| 3.00PM to 4.30 PM | Radiology and Hospital administration and Emergency Medicine | Dermatology     | Psychiatry And Radiotherapy |

4. All the PG Degree candidates will be posted to Medical Colleges.
5. The PG candidates in excess of the requirement have to opt APVVP Hospitals. The Counselling for APVVP will be conducted separately; the date of counselling will be announced later.
6. Merit scored in the PG theory examination will be the criteria for giving postings during counselling. In case more than one candidate is having the same marks, Date of Birth will be taken into consideration. The elder person shall get first preference. In case date of birth is also the same, decision will be by toss of coin.
7. Candidates are requested to come to counselling with order of Course completion certificate from Principal and Provisional Pass certificate from Dr.NTRUHS.
8. The candidates are instructed that they may have to stay an extra day if the counselling for their subject is not completed on that particular day.
9. Though the postings shall be as per counselling and the matrix displayed to a large extent, they shall be changed by the concerned authorities as per the needs of the hospital under their control.
10. PGs from other states may also appear for counselling (Telangana state PGs should bring NOC from the DME, TS. However, other State candidate's names will be placed at the end of the merit list.
11. These conditions shall be applicable to all the candidates of all the PG courses of Government Medical colleges as well as Private, Minority Medical colleges
12. The DNB candidates will be considered, depending on the vacancy position, by the DME at a later date.
13. The Job chart for Senior Residents will be as notified in GOMS No 107 dated 18-07-2013 of Govt of AP.
14. The enhanced remuneration is as per GO MS No 18-dated 05-03-2018 of Govt of AP.
15. Merit list will be displayed on 26th JUNE 2018 on DME web site.

19-06-2018,  
Vijayawada.AP.

Sd/- Dr.K.Babji  
Director of Medical Education

|  |                    |
|--|--------------------|
| <p><b>Government of Andhra Pradesh,<br/>Directorate of Medical Education</b></p> <p><b>Application for Senior residency Programme 2018</b></p> <p>(Please download, and submit three copies attested by the concerned Principal at the counselling centre)</p> | <p>Affix Photo</p> |
|--|--------------------|

|     |  |                  |   |   |   |   |   |   |             |
|-----|--|------------------|---|---|---|---|---|---|-------------|
| 01. | Name of the Candidate<br>(Full Name in block letter including surname) |                  |   |   |   |   |   |   |             |
| 02. | Date of Birth :  |                  |   |   |   |   |   |   | Sex : M / F |
|     |  | D                | D | M | M | Y | Y | Y | Y           |
| 03. | Speciality applied for :   |                  |   |   |   |   |   |   |             |
| 04. | Degree Complited:  |                  |   |   |   |   |   |   |             |
| 05. | Reg.No. (Dr.NTR UHS) / Other State:                                    |                  |   |   |   |   |   |   |             |
| 06. | Name of College Studied and Place:                                     |                  |   |   |   |   |   |   |             |
| 07. | Area of study SVU/AU / OU / Other State                                |                  |   |   |   |   |   |   |             |
| 08. | Local Non Local  |                  |   |   |   |   |   |   |             |
| 09. | Email-id:  |                  |   |   |   |   |   |   |             |
| 10. | Candidate's Phone / Mobile No  |                  |   |   |   |   |   |   |             |
| 11. | Address for communication  |                  |   |   |   |   |   |   |             |
|     |  |                  |   |   |   |   |   |   |             |
|     |  |                  |   |   |   |   |   |   |             |
|     |  |                  |   |   |   |   |   |   |             |
| 12. | Address of Father's / Husband / Wife                                   |                  |   |   |   |   |   |   |             |
|     |  |                  |   |   |   |   |   |   |             |
|     |  |                  |   |   |   |   |   |   |             |
|     |  |                  |   |   |   |   |   |   |             |
| 13. | Contact No   |                  |   |   |   |   |   |   |             |
| 14. | Theory Marks obtained in the Degree /Super Specialty exam              |                  |   |   |   |   |   |   |             |
| 15. | Whether Spouse is working in Govt. service or doing PG :               |                  |   |   |   |   |   |   | Yes / No    |
| 16. | Details of Bank Account  |                  |   |   |   |   |   |   |             |
|     | a  | Name of the Bank |   |   |   |   |   |   |             |
|     | b  | Branch           |   |   |   |   |   |   |             |
|     | c  | Account No       |   |   |   |   |   |   |             |
|     | d  | IFSC code        |   |   |   |   |   |   |             |
| 17. | PAN No.  |                  |   |   |   |   |   |   |             |

**Signature of the Principal**

**Signature of Candidate**

**(For office use only)**

Allotted for posting from \_\_\_\_\_ to \_\_\_\_\_ in  
\_\_\_\_\_ College / Hospital.

**Signature of Counselling Authority**

