



P. O. Moolhikkara, Thalassery,
Kannur - 670 103, Kerala, S. India

MALABAR CANCER CENTRE

(an autonomous centre under Government of Kerala)

Tel : +91 490 2355881
Fax : +91 490 2355880
E-mail : mcctly@gmail.com
Website : www.mcc.kerala.gov.in

No. 2163/SENIOR-HOUSE-SURGEONCY/2017/MCC

Date: 28-02-2019

ADVERTISEMENT FOR THE POST OF SENIOR HOUSE SURGEONCY

Malabar Cancer Center Invites applications for the post of Senior House Surgeons in the Department of Dentistry & Rehabilitation.

Department of Dentistry & Rehabilitation at MCC, provides dental services to all the registered Cancer patients. Pre-radiation dental screening is made mandatory for all head and neck cancer patients. Dental restorations, oral prophylaxis, extractions, endodontics, fixed and removable prosthesis are provided for such patients. Hematological patients and patients with solid tumours having skeletal metastasis are also screened for dental health and necessary dental treatment carried out. Dental Implantology & Maxillofacial Prosthetic services are also being provided.

Senior House Surgeoncy Programme

The candidates are entrusted to perform clinical OP services under supervision of the faculties. Actively involves in dental treatment planning of Oncology patients. Attend academic seminars, specialty board meetings and discussions at MCC.

The candidates will get direct exposure and training in

1. Basic dental surgical procedures.
2. Rotary endodontics
3. Removable prosthodontics
4. Fixed prosthodontics
5. Implantology
6. Digital Dental radiography.
7. Dental treatment planning in oncology patients
8. Maxillofacial prosthesis for oncology patients.

Eligibility: BDS with permanent Dental Council Registration. Experienced candidates shall get a preference.

No of Seats: One

Duration: 1 year. Will receive an experience certificate **ONLY** on successful completion of **ONE YEAR**.

Fees: Rs. 12000/ Year.

Timing: All working days 9 am- 5 pm.

Last Date of receipt of applications: 25/03/2019 till 4:30pm

INSTRUCTIONS:

1. Candidates should download prescribed application form from MCC website www.mcc.kerala.gov.in .
 2. Duly signed, hard/ print copy of downloaded application form should be forwarded to The Director, Malabar Cancer Centre, Moozhikkara PO, Thalassery, Kerala-670103, so as to reach MCC on or before 25/03/2019 till 4:30 PM
 3. The envelope containing application should be super scribed as “Application for the Post of” with post name.
 4. Selection will be based on qualification and experience and performance in the interview. Claims in respect of Qualifications, Experience, etc. should be supported by copies of relevant documents.
 5. No TA/DA will be paid for the Interview
 6. Communication of interview call letter from MCC will be through e-mail/Post only. Candidates are advised to visit our website www.mcc.kerala.gov.in regularly for updates/ notices and announcements.
 7. Canvassing in any form will lead to automatic disqualification. Candidates are advised to desist from such unholy practices.
 8. Late applications will not be considered after the last date of submission.
 9. The Director-MCC will hold the right to reject any application without any information.
 10. For any clarifications, please contact Dr. PRAMOD SANKAR.S MDS, Prosthodontist & Associate Professor, Department of Dentistry & Rehabilitation, Malabar Cancer Centre, Thalassery, Kerala.
- Phone: 0490 2399231, E-mail Id: sankar.pramod@gmail.com

Sd/-
DIRECTOR



MALABAR CANCER CENTRE

(An autonomous centre under Government of Kerala)

APPLICATION FORM FOR SENIOR HOUSE SURGEONCY March, 2019

Instructions:

1. Read the notification carefully before filling in the application form
2. Incomplete applications will be summarily rejected.
3. Form should be filled in Capital Letters or printed in A4 Sheet
4. All irrelevant columns to be marked with NA

Name:		(Affix Recent Passport Size Photograph Here)
Age:	Date of Birth:	
Gender:		
Address for Communication:		
Phone Number:		
Email:		
Religion / Caste:		
Place of Birth:		
Name of Father / Mother:		

Academic Record

Exam Passed	Specialization	College/Institute	Board University	Year of Passing	Percentage Marks	Class Grade

Professional Experience:

From Date	To Date	Duration (mo)	Institute	Designation	Job Profile

Any Details of Extracurricular Activities Participated In:

Number of Publications in Peer Reviewed Journals:

Number of Posters / Presentations in State Level Conferences:

Number of Posters / Presentations in National Level Conferences:

Number of Posters / Presentations in International Conferences:

Have you been debarred from appearing for any exam conducted by any Central/State Government/ Quasi Government bodies/ dismissed from service or convicted by a Court of Law? (If Yes Give Details)

Attested copies of the following to be provided in addition:

1. Age Proof
2. Valid Dental Council registration.

I hereby declare that I have carefully read and fully understood all the instructions and details pertaining to the post being applied by me and all statements made and information furnished in this application are true and complete to the best of my knowledge and belief. In the event of suppression or distortion of any fact including category or educational qualification, etc. made in my application form, I understand that I will be denied any employment in the Institute and if already employed on any of the posts in the Institute, my services will be terminated forthwith.

Place:

Date:

Name & Signature

NB: All the candidates should produce original and attested copies of all certificates of qualifying exam, experience, conferences, and publications etc at the time of selection process.