भारत सरकार
Government of India
स्वास्थ्य एवं परिवार कल्याण मंत्रालय
Ministry of Health & Family Welfare
वर्धमान महावीर चिकित्सा महाविद्यालय एवं सफदरजंग अस्पताल, नई दिल्ली – 110029
Vardhman Mahavir Medical College & Safdarjung Hospital, New Delhi – 110029
मनोचिकित्सा विभाग
Department of Psychiatry

RECRUITMENT NOTICE

WALK-IN INTERVIEW FOR ONE POST OF MEDICAL OFFICER FOR OUT-PATIENT ADDICTION TREATMENT FACILITY AT VARDHMAN MAHAVIR MEDICAL COLLEGE & SAFDARJUNG HOSPITAL, NEW DELHI

The institute runs Outpatient Addiction Treatment Facility via a scheme under the umbrella of the Ministry of Social Justice and Empowerment (MoSJE), Government of India, for establishing Addiction Treatment Facilities (ATFs) in Government Hospitals / Health care settings. The scheme is coordinated and implemented at the national level by the National Drug Dependence Treatment Centre (NDDTC), All India Institute of Medical Sciences (AIIMS), New Delhi. **Walk-in interview for filling the various contractual posts under this scheme would be held on 05.10.2026.**

S. No.	Name of Post	Number of Posts	Educational Qualification and Experience	Monthly Emoluments	Duration
1.	Doctor (Medical Officer)	1	Minimum qualification of MBBS from a recognized institution along with Medical Council registration / State Council registration (preferable: MD or equivalent qualification in Psychiatry).	Rs. 71,550	1 Year

*** If for any post the number of candidates is found to be more than 30, a written exam may be conducted to shortlist candidates.**

सत्यमेव जयते

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Department of Psychiatry

APPLICATION FORM

(Application for appointment on Contract Basis)

Affix
Passport Size
Photo

1. Post applying for : _____
2. Applicant's Name : _____ Sex : _____
3. Father's Name : _____ Mother's Name : _____
4. Spouse Name : _____
5. Date of Birth : _____ Age : _____
6. Marital Status : _____
7. Mailing Address : _____

   _____
8. Permanent Address : _____

   _____
9. E-mail Address : _____
10. Telephone Number : _____ Mobile Number : _____
11. **Educational / Technical / Professional Qualification (High School and above):**
12. **Attach Certificates**

Qualification	Board / University / Institution	Passing Year	Percentage / Marks	Year

Qualification	Board / University / Institution	Passing Year	Percentage / Marks	Year

(Proof to be attached: Mark sheets, degree certificate, registration etc.)

13. **Computer Skills**

Working knowledge of MS Office / E-mail : Yes / No

Knowledge of English / Hindi typing : Yes / No

14. **Experience (From present to previous):**

(Attach proof of previous experience like appointment letter, experience certificate, salary certificates etc.)

Designation	Name of Institution / Organization	Nature of Work	Working Duration	
			From	To

15. Any other information : _____

DECLARATION

I declare that the information given above is true to the best of my knowledge and belief. Any information, if found false, will result in rejection of my candidature.

Date: _____

Place: _____ Applicant's Signature

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GENERAL INSTRUCTIONS FOR FILLING UP OF THE APPLICATION FORM

1. Candidates are advised to fill up the form in the format provided.
2. Please note that all the columns of the application have to be compulsorily filled up. In case of nil information for a particular column, 'N/A' is to be written. The form is to be filled up by the candidate himself / herself in Block Capitals with blue/black ball point pen. The form is to be filled up neatly without any overwriting. Use of corrective fluid (whitener) is not permitted. Column-wise instructions are as under:
3. **NAME:** Full name as written in the Matriculation Certificate is to be written.
4. **MOTHER'S NAME:** Mother's name as written in the Matriculation Certificate is to be written.
5. **FATHER'S NAME:** Father's name as written in the Matriculation Certificate is to be written.
6. **GENDER:** Male / Female
7. **PRESENT ADDRESS WITH PIN CODE:** Complete present address of the candidate with PIN code is to be written.
8. **MOBILE NO.:** Self mobile number.
9. **E-MAIL:** Self e-mail address.
10. **DATE OF BIRTH:** Date of birth as per the Matriculation Certificate is to be written in DD/MM/YYYY format.
11. **DECLARATION:** The candidate should carefully read and understand the declaration before signing.
12. **SIGNATURE OF APPLICANT:** The candidate should sign in the space provided.
13. **PLACE & DATE:** Place and date to be filled up at the time of filling up the application form.
14. **The candidates have to come for the walk-in interview on 05.10.2026 and the registration process for the walk-in interview will be done from 9–11 am on 05.10.2026. No candidate shall be entertained thereafter.**
15. Only shortlisted candidates will be allowed for the interview.
16. The appointment is purely on a contract basis and at any point of time the contract can be terminated mutually by either side with prior notice.
17. Based on this experience, the selected candidate cannot claim any permanent employment either from VMMC & Safdarjung Hospital or from the Nodal Officer of the project.
18. The results of the interview will be displayed on the VMMC-SJH website.

Nodal Officer
Addiction Treatment Facility
VMMC & Safdarjung Hospital