



PRINCIPAL OFFICE
MAHARAJA SUHEL DEV MEDICAL COLLEGE &
MAHRISHI BALARK HOSPITALS, BAHRAICH – 271801
 Phone No. 05252-237621



Website: www.asmcbrh.edu.in

Email ID:- principal.medical.college.brh@gmail.com

Letter No.:- MSDASMC&MBH /BRH/2026 /63

Date :- 06 / 01 / 2026

ADVERTISEMENT

Applications are invited on the prescribed format for the post of Professors, Associate Professor and Assistant Professor, Maharaja Suhel Dev Autonomous State Medical College & Mahrishi Balark Hospitals, Bahraich. The tentative number of posts are given below:-

Sr. No	Name Of Speciality	Professor				Associate Professor				Assistant Professor			
		GEN	OBC	SC	EWS	GEN	OBC	SC	EWS	GEN	OBC	SC	EWS
1.	Orthopaedics	-	-	-	-	-	-	-	-	-	01	-	-
2.	Ophthalmology	01	-	-	-	-	-	01	-	01	-	01	-
3.	Obstetrics & Gynaecology	01	-	-	-	-	-	01	-	-	-	-	-
4.	Blood Bank	-	01	-	-	01	-	-	-	-	-	-	-
5.	Emergency Medicine	-	-	01	-	-	01	-	-	01	-	01	-
6.	Anatomy	-	-	-	-	-	-	-	-	01	-	-	-
7.	Anaesthesiology	01	-	-	-	-	01	-	-	02	01	01	-
8.	ENT	-	-	-	-	-	-	-	-	-	-	-	01
9.	Community Medicine	-	-	-	-	-	-	-	-	02*	01	-	-
10.	General Medicine	-	-	-	-	01	02	-	-	01	02	-	-
11.	General Surgery	01	-	-	-	01	-	-	-	-	01	01	-
12.	Tuberculosis & Respiratory Medicine	-	-	-	-	-	-	01	-	-	01	-	-
13.	Skin & VD	-	-	-	-	01	-	-	-	01	-	-	-
14.	Dentistry	-	-	-	-	-	01	-	-	-	-	02	-
15.	Paediatrics	-	01	-	-	-	-	01	-	-	-	-	-
16.	Pathology	01	-	-	-	-	-	01	-	-	-	01	-
17.	Pharmacology	-	01	-	-	-	-	-	-	01	-	-	-
18.	Physiology	-	-	-	-	-	-	-	-	-	-	-	-
19.	PMR	-	01	-	-	-	-	-	-	-	-	-	-
20.	Forensic Medicine	-	-	-	-	01	-	-	-	-	-	-	-
21.	Biochemistry	-	-	-	-	-	-	01	-	-	-	-	-
22.	Microbiology	-	-	01	-	-	-	01	-	-	-	01	-
23.	Radio-Therapy	01	-	-	-	-	-	01	-	-	-	-	-
24.	Radio-Diagnosis	-	01	-	-	01	-	-	-	-	-	-	-
25.	Psychiatry	-	-	-	-	01	-	-	-	-	-	-	-
	TOTAL	06	05	02	-	07	06	06	-	11	08	08	01

Note:- * Only for Candidates Having PG Degree

* Medical Officer Health cum Lecturer/Assistant Professor in the Department of Community Medicine.

For Details regarding Qualification, Pay Scale, Application Fee, Eligibility etc please refer to college website: www.asmcbrh.edu.in

- 1- Qualification/Experience for the posts of faculty will be as per latest NMC norms on Last date of Form Submission.
- 2- A candidate for the post (s) in the service must have attained the minimum age of 26 years & must not have attained the maximum age 65 years on the first day of July of calendar.
- 3- Pay Scale:-
 - I. Professor - Academic Level 14, Initial Pay Rs.1, 44,200.00
 - II. Associate Professor - Academic Level 13A, Initial Pay Rs. 1,31,400.00
 - III. Assistant Professor - Academic Level 11, Initial Pay Rs. 68,900.00
 (The Pay / Allowance of the Professor and Associate Professor in State Medical College by the State Government will be permissible)





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- 4- Application Fee:-
A demand draft of Rs.2,000/- (Rs. Two Thousand only) payable in favour of "Principal, ASMC and Associated Teaching Hospitals Bahraich" is mandatory as application fee.
- 5- No TA/DA for attending the interview is payable.
- 6- Number of posts may increase or decrease.
- 7- Ex-Service persons/DNB qualified candidates may also apply as per NMC norms.
- 8- Interested candidates are invited to send their application on prescribed format (downloadable from www.asmcbrh.edu.in along with all relevant documents latest by date:- 14.02.2026 till 05:00 p.m. to the Office of the Principal, MSD Autonomous State Medical College & Maharishi Balark Hospitals, KDC Road Bahraich-271801, Uttar Pradesh only by registered/speed post.
- 9- It will be mandatory for the candidates working in any Institute to submit the No Objection Certificate of the concerned Institute.
- 10- Application Received After due date, time and incomplete in any form will not be considered.
- 11- A non-teaching Consultant or Specialist or Medical Officer may also apply as per NMC norms dated-30.06.2025.

Note:- If required the Post of Professor will be Down graded in same category.



Maharaja Suhel Dev Medical College & Maharishi Balark Hospitals, Bahraich.

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**MAHARAJA SUHELDEV AUTONOMOUS STATE MEDICAL COLLEGE & MAHARISHI
BALARK HOSPITALS, BAIHRAICHI-271801**
Application Form For Faculty

Advertisement Number and Date

Post (The Post for which the Application is being made)

Note: All information must be completed by the Applicant.

Self
Attested
Photo

- 1- Name of Applicant
- 2- Male/Female
- 3- Father/Husband's Name (including Surname)
- 4- Present Address of Residence (including PIN code)

Name of the City Phone No. Mobile
Number Email ID

- 5- Permanent Address

Name of the City Phone No.
Mobile Number

- 6- Adhar Card Number (if any)

- 7- Date of Birth (enclose the Mark Sheet of High School Examination)

- 8- Age of Applicant Day Month Year

- 9- Applicant's Marital Status - Married / Unmarried

- 10- Date of Marriage

- 11- Category: Unreserved/ Scheduled Caste/ Scheduled Tribes/ Other Back Ward Classes/ Disabled

(Attached photocopy of certificate issued by competent authority for reserved category)

- 12- Registration Number of the Medical Council and Date

- a. MBBS-
- b. MD/MS-
- c. MCH/DM-

13- Educational Qualifications: (Enclosed attested photo copies of certificates and marks sheets):-

S. No.	Name of the Examination	Institution/ Board/ University	Year	Subject	Marks Obtained/ Max. Marks	MBBS Total Marks Percentage	Effort (attempts)
1.	MBBS						
2.	MD/MS						
3.	DM/MCH						

14 - Educational Experience:-

S. No.	Designation	From	To	Duration	Institution Name
1.	Professor				
2.	Associate Professor				
3.	Assistant Professor				
4.	SR/Tutor/Demonstrator				

(Attach experience certificate)

15- Research Publication:-

S. No.	Designation	Research Publication
1.	Professor	
2.	Associate Professor	
3.	Assistant. Professor	
4.	SR/Tutor/Demonstrator	

(Attach photo copy)

16- Application Fee: Demand Draft No Dated Bank Name
 for Rs in favour of "Principal ASMC
 and Associated Teaching Hospitals, Bahraich" is attached in original.

17- List of attached certificates

Place:

Date:

Full Name and Signature of the Applicant



//Announcement//

1. I certify that above information given by me is complete and true, in the event of information being false, my Application form/appointment letter can be cancelled.
2. I certify that I have not been found guilty by any court of any offense of moral decimation nor is there any such case against me in any jurisdiction.

Place:

Date:

Full Name and Signature of the Applicant

