Hos EPBX

: 2226334-38

Institute FAX : 2226329 : 2226329 Gram College Hospital BIKMEDCOLL 2226300-01 2226304

## ACHARYA TULSI REGIONAL CANCER TREATMENT AND RESEARCH INSTITUTE, BIKANER (REGIONAL CANCER CENTER)

ASSOCIATED GROUP OF HOSPITALS, S.P. MEDICAL COLLEGE, BIKANER 334003 (RAJ.)

Ref No. RT/ATRI/BKN //057

Date. 27/11/2025

## ADVERTISEMENT FOR MEDICAL PHYSICS INTERNSHIP PROGRAMME

Applications from eligible candidates having the following qualifications are hereby invited for the position of Intern Medical Physicist (duration of program: 1 year) on a fixed monthly stipend of Rs. 10,000 (Ten thousand rupees only without accommodation) in this institute.

| S. No | Name of the Post            | Maximum Age       | No. of | Essential qualification required as per AERB |                                                                                                   |  |
|-------|-----------------------------|-------------------|--------|----------------------------------------------|---------------------------------------------------------------------------------------------------|--|
|       |                             |                   | Posts  |                                              |                                                                                                   |  |
| 1.    | Intern Medical<br>Physicist | As per Govt rules | 02     | (i)                                          | A post graduate degree in Physics from a recognized university                                    |  |
|       |                             |                   |        | (ii)                                         | A post M.Sc. Diploma in                                                                           |  |
|       |                             |                   |        |                                              | Radiological/Medical Physics from a                                                               |  |
|       |                             |                   |        |                                              | recognized university/institution                                                                 |  |
| Arr.  |                             |                   | * *    |                                              | approved by AERB                                                                                  |  |
|       |                             | J. E.             |        |                                              | OR                                                                                                |  |
|       |                             | ¥                 |        | (i)                                          | A basic degree in science from a recognized university, with Physics as one of the main subjects; |  |
|       |                             |                   |        | (ii)                                         | A post graduate degree in                                                                         |  |
|       |                             | <u>₩</u>          |        |                                              | Radiological/Medical Physics/Radiation                                                            |  |
|       | ,                           |                   |        |                                              | Physics from a recognized                                                                         |  |
|       |                             |                   |        |                                              | university/institution approved by AERB                                                           |  |

The application along with the duly filled proforma attached with this advertisement and self-attested copies of educational qualifications (10<sup>th</sup>, 12<sup>th</sup>, UG and PG degree certificates and mark sheets, etc.) should reach this office on or before 10.12.2025 either by post or by email at directorrccbkn@gmail.com. This advertisement along with the proforma is also available on our website <a href="https://www.rccbikaner.in">www.rccbikaner.in</a>.

Director

Acharya Tulsi Regional Cancer Treatment & Research Institute,

Dirocibikaner

Acharya Tulsi Regional Cancer Treatment & Research Instituto BIKANER (RAJ.)

## PROFORMA FOR APPLICATION FOR THE MEDICAL PHYSICS INTERNSHIP PROGRAMME

(to be attached with the email as PDF copy)

| 1. | Name in Block letters     | : |
|----|---------------------------|---|
| 2. | Date of Birth & Age       | : |
| 3. | Gender                    | : |
| 4. | Nationality               | : |
| 5. | Email ID & Mobile Number  | : |
| 6. | Address for communication |   |

| Sr. | Educational                                       | University/ | Month / Year | List of Major and                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                             |
|-----|---------------------------------------------------|-------------|--------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| No  | Qualification                                     | Institution | of Passing   | Allied Subjects                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Percentage                  |
| 1.  | 10 <sup>th</sup> (SSC)                            |             |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                             |
| 2.  | 12 <sup>th</sup> (HSC)                            |             |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                             |
| 3.  | Under Graduate<br>(Major + Allied only)           |             |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                             |
| 4.  | Post Graduate                                     |             |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | - 2m                        |
| 5.  | Post M.Sc., Diploma<br>in Radiological<br>Physics |             |              | Comments of the Comments of th | 9 - 1<br>- 2 - 2<br>- 3 - 4 |

## Note:

- 1. The CGPA/Grade must be converted into a percentage and entered in the prescribed table.
- 2. The method used for conversion must be enclosed with the documents.
- 3. All mark calculation sheets must be enclosed with the application form.

| DECLARATION       |                      |                        |             |                |               |       |
|-------------------|----------------------|------------------------|-------------|----------------|---------------|-------|
| Ι,                |                      |                        |             | nereby decla   | re that all   | th    |
| information pro   | vided in this applic | ation is true, comple  | te, and acc | curate. I unde | rstand that   | if an |
| information is fo | ound to be false or  | incorrect at any stage | e before or | after the sele | ection proces | s, m  |
| candidature may   | be cancelled witho   | ut prior notice.       |             |                |               |       |
|                   |                      |                        |             |                |               |       |
| Place:            |                      |                        |             |                |               |       |
| Date:             |                      |                        |             | Signature      | of the Candi  | date  |