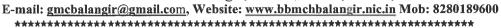


## OFFICE OF THE DEAN & PRINCIPAL BHIMA BHOI MEDICAL COLLEGE & HOSPITAL, BALANGIR

At/Po/Dist.- Balangir, PIN- 767002 (Odisha)



No. 1587 /Estt

Dt. 17.03.2025

## **NOTICE**

The candidates provisionally selected for the post of Junior Resident & Tutor vide this Office Order No. 1564 Dt. 13.03.2025 and 1584 Dt. 17.03.2025 and have applied for more than one post are hereby instructed to submit "OPTION FORM" (attached) to the undersigned through E-mail- (gmcbalangir@gmail.com) on 18.03.2025 before 12.00 Noon

Dean & Principal

BBMCH, Balangir
Dean & Principal
BBMCH, Balangir

Memo No.- \5\\ \%\ /Estt. Dt. 13.03.2025

Copy to College Notice Board/ College Website for information of Candidates

Dean & Principal BBMCH, Balangir

Dean & Principal BBMCH, Balangir

## OPTION FORM AND DECLARATION OF JUNIOR RESIDENTS, IN BBMCH, Balangir

I. Dr.
I, Dr, do hereby exercise my option and declare today, i.e. on Dt at
held onby the Office of the Dean & Principal, Balangir as under.
That, I shall join as Junior Resident at(Name of the College Allotted)
<ul> <li>That, I shall abide with the terms and conditions mentioned in the HFW, Odisha Resolution No. 18582/H dt.13.08.2020.</li> </ul>
<ul> <li>That, I have not concealed any fact or figures in my application form submitted to this effect.</li> </ul>
<ul> <li>That, I am not appointed and working as a Junior Resident in any Govt. Medical Colleges of the State.</li> </ul>
<ul> <li>That, if subsequently, I am found to have submitted any false facts or concealed any facts, my Junior Resident posting will be cancelled &amp; disciplinary action, as deemed proper, shall be initiated against me.</li> </ul>
Full Signature of the candidate
Full Signature of the candidate  Place: Balangir
Place: Balangir
Place: Balangir  Date:
Place: Balangir
Place: Balangir  Date:
Place: Balangir  Date:  Present place of Posting (If In-Service/Contractual)  Email
Place: Balangir  Date:  Present place of Posting (If In-Service/Contractual)
Place: Balangir  Date:  Present place of Posting (If In-Service/Contractual)  Email
Place: Balangir  Date:  Present place of Posting (If In-Service/Contractual)  Email
Place: Balangir  Date:  Present place of Posting (If In-Service/Contractual)  Email  Phone Number
Place: Balangir  Date:  Present place of Posting (If In-Service/Contractual)  Email
Place: Balangir  Date:
Place: Balangir  Date:
Place: Balangir  Date:

Full Signature of the candidate

Date

## OPTION FORM AND DECLARATION OF TUTOR

I, Dr, do hereby exercise my option and declare today, i.e. on Dt
<ul> <li>That, I shall abide with the terms and conditions mentioned in the HFW, Odisha Resolution No. 18582/H dt.13.08.2020.</li> <li>That, I have not concealed any fact or figures in my application form submitted to this effect.</li> <li>That, I am not appointed and working as a Tutor in any Govt Medical College of the State.</li> <li>That, if subsequently, I am found to have submitted any false facts or concealed any facts, my SR posting will be cancelled &amp; disciplinary action, as deemed proper, shall be initiated against me.</li> </ul>
Signature of the candidate Place: Bhubaneswar
Date
Present place of Posting (If In-Service)
Email
Phone Number
Refusal:
I do hereby declare that, I refuse to give my option for the post of Tutor inat and I don't have any objection, if my seat is allotted to the next candidate on merit.

Signature of the candidate