

# REGIONAL CANCER CENTRE, THIRUVANANTHAPURAM

Tel: 0471-2522278, Website - www.rcctvm.gov.in

RCC/1099/2021/ADMN-2

12/03/2024

#### REQUIRES

#### **RADIOLOGIST (On Part Time Basis)**

Applications are invited in the prescribed format for the post of **RADIOLOGIST on part time basis** possessing the following qualifications in Regional Cancer Centre, Thiruvananthapuram.

#### **QUALIFICATION & EXPERIENCE**

**Basic Qualification** 

: Must have MD/DNB in Radiodiagnosis

Desirable

: Work experience in RCC

**Nature of Work** 

: Cross Sectional Imaging reporting

(Reporting can be done at any time including weekends. No stipulated working hours/days)

Interested candidates who possess the above qualification may download the application from RCC website (<u>WWW.rcctvm.gov.in</u>). Filled in and signed application form affixing recent passport size photograph along with the self-attested copies of the following documents should reach <u>"The Director, Regional Cancer Centre, Medical College P.O,Thiruvananthapuram - 695011, Kerala", latest by 3.00 PM on 30/03/2024.</u>

- i. Proof of Qualification & Experience
- ii. TCMC Registration Certificate
- iii. CV/Bio data
- iv. NOC from currently employed Institution (if applicable)

\* Applications without the above listed documents will be rejected (The selected candidate should execute a MOU with RCC)

**DIRECTOR** 



## REGIONAL CANCER CENTRE, THIRUVANANTHAPURAM

### **APPLICATION FORM**

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Name of Post		RADIOLOGIST ON PART TIME BASIS		
Name of the Applicant (in blo	ck letters)			
Age & Date of Birth				
Address for Communication with Pin code		Permanent Address with Pin code		
Contact No				
Email ID :				
TCMC Registration No:				
	EDUCATIONAL (	QUAL	IFICATIONS	
Name of Examination passed	Board/ Universi	ty	Reg.No	Year & month of Passing
	EXPE	RIENC	CE .	
Name of Institution	Post held		Period (from - to)	Duration
I hereby declare that the	e above entries are	true	to the best of my	knowledge and helief
. Hereby action that the	c and the criticity are		to the best of my	de la conci

Place:	
Date:	SIGNATURE OF THE CANDIDATE