

NOTIFICATION

**PROMOTION UNDER THE ASSESSMENT PROMOTION SCHEME (APS) FOR
MEDICAL FACULTY AT THE LEVEL OF ASSOCIATE PROFESSOR &
ASSISTANT PROFESSOR, AIIMS BATHINDA**

1. AIIMS Bathinda invites offline applications for promotion under the Assessment Promotion Scheme (APS) w.r.t. medical faculties at the level of Associate Professor and Assistant Professor of AIIMS Bathinda.
2. In this connection, the faculties who have completed & confirmed their probationary terms of 2 years, as well as 3 years of continuous services at AIIMS Bathinda, may submit their offline applications in the prescribed proforma as attached as per ANNEXURE-X through the proper channel addressing to **The Executive Director, All India Institute of Medical Sciences (AIIMS), Bathinda**. Hence, faculties are requested to submit their application in the prescribed proforma attached with this Notification latest by **20th July 2023 by 5 PM**. This is issued with the approval of the Competent Authority.
3. Address for sending the hard copy of the off-line application and relevant documents is as under : -

The Recruitment Cell,
Ground Floor, Administrative Block,
Medical College
Mandi Dabwali Road,
AIIMS, Bathinda-151001, Punjab

Copy to :-

1. All the faculty members of AIIMS, Bathinda
2. PA to ED, AIIMS, Bathinda- for kind information of ED.
3. HoDs of various Depts. of AIIMS Bathinda.
4. Dean (Academics), AIIMS Bathinda.
5. Medical Superintendent, AIIMS Bathinda
6. OIC IT Cell - with a kind request to upload the same on the website.
7. Concerned file.

APS PROFORMA

1. Name of the Faculty
2. Designation & Department
3. Date of Joining at AIIMS Bathinda
4. Date of Birth
5. (i) Registration No. & Date
(ii) Central/State Medical Council in which registered
6. **Educational Qualifications (Only Degrees and Diplomas awarded through a course of study, examination or research to be included) :-**

Examination Passed	Year of Passing	No. of Attempts	University/institution
(a) Undergraduate Career			
(b) Postgraduate Career			

7. Experience (Starting from Assistant Professor in AIIMS Bathinda :-

Post Held (Indicate Temporary/Permanent)	Period		Total Period			Employer Name
	From	To	Years	Months	Days	

8. Additional qualification such as :
Membership of scientific society

9. Publications: Number of Papers :
(Only include papers published in the period under review).

	Published		Accepted for Publication (With Proof)	Presented at Conferences
	Indexed	Non-Indexed		
National				
International				
Total				

10. Papers Published (Details) :

(a) Work done outside AIIMS Bathinda (but published during the period under review) should be marked with an * in the Serial Number Column.

(b) Only include papers published in the period under review.

SI. No.	List of Papers in Vancouver style	Type of paper(Original article/ review / case report/ editorial)	Impact Factor

11. Chapter in Books/Books Edited :

12. Work Teaching: Please be as accurate as possible. If not applicable, state NA.

(a) Didactic Lectures Delivered (Per Year) :

(b) Participation in Departmental, Institutional :
Programs sponsored by National Associations
& other educational Institutions, educational
exercises i.e., continuous Medical Education,
Grand rounds, seminars, workshop

- (c) Clinical Teaching Experience :
- (d) Inter-Departmental Teaching :
- (e) Visiting Professorship :
- (f) Question Bank Formation :
- (g) Production of teaching Material/ Books/ Monographs / Teaching Manuals :
- (h) Innovation in teaching methods introduced :
- (j) Thesis/dissertation guided in the period under Review .

Sl.No.	Ph.D/MD/MS/ICMRSTS	Guide/Co-guide	Title of thesis /dissertation/Project

- (k) CME/Workshop conducted during period under review :

Sl.No.	Name of CME/Workshop	Dates	Role of the Faculty

13. Patient Care Services (If not applicable- write NA)

- OPD Clinic attended / Month :
- IPD duties assigned & done / Month :
- Procedures / Surgeries undertaken :
- New Technique Developed :
- New Services Started, Creation of disease management programmes :
- Destination Programs(High Excellence) :
- Interdisciplinary clinical treatment that are pace setters for other systems to adopt. :
- Development of new care models/ care delivery methods :

14. Grants obtained as Principal Investigator :-

Sl.No.	Title of the project	Intramural /Extramural	Name of Agency	Amount

15. Grants obtained as Co-investigator :-

Sl.No.	Title of the project	Intramural /Extramural	Name of Agency	Amount

16. Highlights of your research/any other Major contribution :

(a) Awards/recognition/honors with year of the award

(b) State your contribution to AIIMS Bathinda and your plans in not more than 250 words (use a separate sheet)

DECLARATION

I hereby declare that the above information is true, complete, and correct to the best of my knowledge and belief and that I have only included information on work done during the period under review.

Place:

Signature of the Applicant

Date

Signature
Name, Designation & Office Seal
of the Recommending & Forwarding
Authority (Head of the Dept. /Officer 1/C of Dept.):