

MAEER MIT Pune's

MAEER COLLEGE OF NURSING

Talegaon Dabhade, Tal. Maval, Dist. Pune. Ph.: 02114-308369

Email: principalnursing@mitmimer.com | Website: http://mitmimer.com/nursing (Affiliated to Maharashtra University of Health Sciences, Nashik)

WANTED

Applications are invited along with all necessary copy of certificates, from the eligible candidates for the following posts. Qualification and Experience as per Council and MUHS Norms and University Notification No. 07/2024.

Sr. No.	Designation	Subject	Total Posts	sc	ST	VJ -A	NT -B	NT -C	SBC	овс	SEBC	EWC	OPEN	Person With Disabilities
1	Professor cum Principal	Any Subject	1	-	T	-	-	-	-	-	-	-	1	-
2	Professor cum Vice-Principal	Any Subject	1	-	-	-	-	-	I	-	1	I	1	-
3	Professor	Any Subject	1	-	_	_	-	_	-	-	-	-	1	-
4	Clincal Instructor / Tutor	B.Sc. Nursing/ P.B. B.Sc./ M.Sc. Nursing (Any Subject)	8	1	1	1	-	-	-	1	-	1	3	-

NOTE: For Detail information about post, qualification, and other terms and conditions please visit college website. Interested candidates may apply within 7 days from the date of advertisement. Send CV and all relevant documents to the Principal, MAEER College of Nursing, Talegaon Dabhade on Email ID-

principalnursing@mitmimer.com

Executive Director

MAEER College of Nursing, Talegaon Dabhade

A) Qualifications and Experience:

Sr. No.	Post	Essential Qualification	Experience
1.	Professor cum Principal	M.Sc. (Nursing)	M.Sc. (Nursing) having total 15 years' experience with M.Sc. (Nursing) out of which 10 years teaching experience after M.Sc. (Nursing) in collegiate program. Ph.D. (Nursing) is desirable
2.	Professor cum Vice -Principal	M.Sc. (Nursing)	M.Sc. (Nursing) total 12 years' experiencewith M.Sc. (Nursing) out of which 10 years teaching experience after M.Sc. (Nursing) in collegiate program. Ph.D. (Nursing) is desirable
3.	Professor	M.Sc. (Nursing)	M.Sc. (Nursing) total 12 years' experience with M.Sc. (Nursing) out of which 10 years teaching experience after M.Sc. (Nursing) in collegiate program. Ph.D. (Nursing) is desirable
4.	Clinical Instructor	M.Sc. (Nursing) preferable	B. Sc. (Nursing)/ P. B. B. Sc. (Nursing)with 1 year experience

(B) **Note:**

- * College means a recognized training institution for the purpose of training and teaching of the B.Sc. (Nursing) course; Ref:- The Gazette of India CG-DL-E-06072021-228130 EXTRAORDINARY PART III-Section 4 No. 275 NEW DELHI, MONDAY, JULY 5, 021/ASHADHA 14, 1943 page No. 214.
- * Teaching Experience in collegiate program means a Teaching Experience in recognized training institution for the purpose of training and teaching of the B.Sc. (Nursing)/ P.B. B.Sc. (Nursing)/ M.Sc. (Nursing) course;
- * College of Nursing which has a parent hospital 500 Beded and B.Sc. Nursing Intake 100 seats may adopt the integration of service and education model recommended by the Council placed at www.indiannursingcouncil.org as well as at M.U.H.S. web site Circular 66/2019 dated 01/10/2019.

Sd/-

EXECUTIVE DIRECTOR MAEER COLLEGE OF NURSING, TALEGAON DABHADE, PUNE

Date: 10/08/2024

Place: TALEGAON DABHADE, PUNE

Post applie	ed			Subject					
FULL NAME								Sex	
In Capital letters								M/F	
POSTAL ADDRESS	City:		Dis	:t. :		Pin code :			
CONTACT DETAILS	Phone (With STD co	: ode)			Cell	No.			
BIRTH DATE (Attach SLC)	in Numerica		/	/ 19					
	Completed Age (on last day of applications): Years - Months - Days -								
Religion :		Categ	ory : SC / ST / VJ	NT / SBC / O	BC / OPEN	Cast:			

QUALIFICATIONS (Attach all relevant Certificates)										
COURSE	Name of the Course	Board / University	Passing Year	% of Marks	Class / Grade					
HSC										
UG										
PG (Speciality)										
Super Speciality (if any)										
PhD / PG Dip.										
OTHER (Please Specify)										
OTHER (Please Specify)										

EXPERIENCE (Attach all relevant Certificates & Approvals. Starting form Present / Latest Job at Sr. No. 01)										
Sr, No	NAME of the COLLEGE	Designatio	Peri	iod of Expe	MUHS Approval					
,		n / Post held	From	То	Duration	Letter No. & Date				
01										
02										
03										
04										
05										

Sr.	Research Activities / Paper Publications	Tick the appropriate box			
No,	(State Briefly. Attach Separate list & details, if required.)	State Level	National Level	Inter-Nati Level	
01					
02					
03					
04					
05					

Registration	State Council :	Ot	ther :
MUHS Activities (State Briefly)			
Other Activities (State Briefly)			

- 1. Attach attested copies of all necessary documents. Please attach separate sheet, if required.
- 2. Attach attested copy of Caste Certificate & Caste Validity Certificate, if applying for Reserved Posts.
- 3. Attach the copy of Non Creamy Layer Certificate for current Financial Year, wherever applicable.
- 4. In service candidates shall apply through proper channel or submit NOC at the time of Interview.
- 5. Application should be complete in all respect. Write Not Applicable in the column which are blank.
- 6. Incomplete Applications, Applications without / or un-attested copies of documents will be rejected.

Date : Applicant's Signature :

1.	Post applied : Subject :											
	Full Nam (Surname Fi	-										
I light of Birth 3c nor 5					da	on Last ay Months	Maxim Age Li					Eligible / Not Eligible
	1	/ 19										
Pos	st whether					Informati	on Of ca	andida	ate			Eligible /
R	eserved	Categor	У	Cast	Ca	st certifica	te Valid	ity cer	rtificate	Non c	reamy Layer	Not Eligible
Y	es / No					Yes / No		Yes / No Yes / N			ot applicable	
Sr. No.		cational fications		Year Passi		Grade / Class	Percen	Percentage		Whether has Requisite Qualifications / Grade		Eligible / Not Eligible
1			UG									
2		PG										
3	F	PhD / PG DIF	/ etc									
4		01	OTHER									
Sr.	Approv				od c	l of Experience					Requisite	Eligible /
No.	Experie					to Duratio			Expe	erience	in Cadre	Not Eligible
1	As Profe											
2	As Read											
3	As Lectu As Tutor											
4	Profession											
Lev	el		No. of Publications / Research / Titles			Accreditati received, If		Whether as pe Relevance			Remarks	Eligible / Not Eligible
Inte	ernational											
Nat	ional											
Sta	State											
ı	MCH Regis	tration No).	Valid Yes / N		Other R	egistrati	ion / N	/lembers	hips	Remarks	Eligible / Not Eligible
	•		Over all remarks with			Signatures of scrutiny committee members with t					embers with th	eir Names
No	ot Eligible	reason	t not	eligible	€,	Memb	er		Principa	al	Chai	irman
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