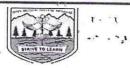
Government Medical College, Srinagar.

10- Karan Nagar, Srinagar Kashmir, 190010 - Ph: 0194-2504114 & FAX No.: 0194-2503115 e-mail id: principalgmcs@gmail.com& Website: www.gmcs.edu.in



NOTICE

Subject: Updating Assessor's List for Undergraduate/ Post Graduate/ Super Specialty Courses – eligible teachers –regarding.

All HOD's of Government Medical College, Srinagar are informed that this office has received a communiqué from Prof. G. Suryanarayan Raju, Member, MARB, National Medical Commission vide No.NMC/(PGEG)/2021-22-Med/037060 Dated: 17-11-2021 (copy attached as Annexure-"A"), where-in it is requested to submit the details of Professor and Associate Professors (with 6 Years of teaching experience) who are willing to take up the assignment of being Assessors for the Medical Assessment & Rating Board (MARB). However it is also informed that no Non-Medical Faculty as well as person due for superannuation in 2022-23 shall be recommended for the assessor list.

In this context, you are requested to send the requisite information / documentation in the prescribed format as a soft copy (in MS word), along with a filled up, signed and scanned pdf file of Declaration Form (copy attached as Annexure-"B") of every proposed individual to the concerned NMC at email id: marb@nmc.org.in, assessment.marb@nmc.org.in with carbon copy (cc) $\underline{principalgmcsgr@gmail.com}$ by or before the prescribed timeframe i.e. 05^{th} December, 2021.

The matter may kindly be treated as MOST URGENT.

Principal/Dean

Govt. Medical College, Srinagar

No. GMC/Acad/ 2328 MC Dated: 25-11-21

Copy to the:

 In-Charge IT Section, GMC Srinagar with the direction to circulate the same to the all HOD's of GMC Srinagar, through the respective email addresses.

2. Office Record File.

11/24/21, 10:49 AM

Gmail - Fwd: Updating Assessor's List for Undergraduate/Post Graduate/Super Specialty Courses - eligible teachers - reg...

द्वरभाष/Phone : 25367033, 25367035, 25367036

Mobile : +91-9810208745 ਵ-ਸੈਕ/E-mail : marb@nmc.org.in पॉकेट -14, सेक्टर-8, द्वारका, फेसा-, नई दिल्ली77-Pocket- 14, Sector- 8, Dwarka, Phase - 1, New Delhi-77

राष्ट्रीय आयुर्विज्ञान आयोग

National Medical Commission

Medical Assessment & Rating Board (MARB)

No. NMC/(PGEG)/2021-22-Med/ 037-060

Date: 17-11-2021

To, The Dean / Principal, All Govt. Medical Colleges.

Subject: Updating Assessor's list for Undergraduate / Postgraduate / Super Specialty Courses- eligible teachers - Reg.

Dear Sir/Madam,

Greetings from the Medical Assessment and Rating Board (MARB) of the National Medical Commission (NMC). As you are aware, the National Medical Commission (NMC) has been bringing in the reforms and rating the colleges and is in the process of gathering information from different sources. Therefore it has been updating the Assessors list from the senior faculty of government run medical institutions.

We are writing this letter for your support and participation in updating the list of eligible Under Graduate / Post Graduate / Super Specialty assessors.

It has been observed that the assessors play a passive role by accepting the information from the colleges rather than finding the factorial information and making the remarks based on their observations.

The Medical Assessment & Rating Board (MARB) relies on our assessor's information for taking appropriate decisions. Hence much emphasis is laid on the fact that they should have integrity and uprightness to bring the facts to our notice. There is a need to identify dependable and wide pool of assessors from every subject.

Therefore, you are requested to submit the details of Professors, Additional Professors and Associate professors (with 6 years of teaching experience) who are willing to take up the assignment of being assessors for the Medical Assessment & Rating Board (MARB). The proposed individuals' names should have integrity and uprightness to bring forth the facts to the Commission. You are requested to identify dependable and wide pool of assessors from every subject, in your institution. It is further informed that no Non-Medical faculty as well as person due for superannuation in 2022-2023 shall be recommended for the assessors list.

You are requested to fill the annexed "Declaration Form" with details of UG / PG /SS assessors from your institute. They also should be interested to accept the invitation to

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दूरभाष/Phone :

: 25367033, 25367035, 25367036

Mobile ई-ਸੇਰ/E-mail

: +91-9810208745 : marb@nmc.org.in पॉकेट -14, सेक्टर-8, द्वारका, फेस1-, नई दिल्ली77-Pocket- 14, Sector- 8, Dwarka, Phase – 1, New Delhi-77

राष्ट्रीय आयुर्विज्ञान आयोग

National Medical Commission

Medical Assessment & Rating Board (MARB)

conduct the assessments within the stipulated timeframe. The last date for submission of the required information is 05th December, 2021.

The relevant details, documents and information should be sent as per the annexed format as a soft copy (in MS Word) along with a filled up, signed and scanned file to marb@nmc.org.in, assessment.marb@nmc.org.in.

In case of any queries please contact MARB (Assessment Cell) on +91-9810208745, 9810206745.

Thank You.

Yours faithfully,

(Prof. G. Suryanarayana Raju) Member, MARB

National Medical Commission

MCI/State Medical Council

Passing -

Qualification with Year of

Registration No.

QUALIFIED

QUALIFICATION (MD/MS)

YEAR

PC

YEAR

SUPER SPECIALITY (DM/M.Ch.)

YEAR

Date of Retirement (DD/MM/YYYY)

teaching

No. of date

experience

Total years of

Assessments done till

faculty

PG BROAD

SUPER

https://mail.google.com/mail.fu/2/http=4301/464ba&view=ptCsearch=allttpe;mit/id=th;eart-f98e/

दूरभाष/Phone : 25367033, 25367035, 25367036 Mobile : +91-9810208745 ई-मेरा/E-mail : marb@nmc.org.in

राष्ट्रीय आयुर्विज्ञान आयोग National Medical Commission Medical Assessment & Kating

Board (MARB)

प्रकेट -१४, सेन्टर-३, हराज, केन्ना-, नई दिन्दी-ग

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77 Pocket-1.5 Sect.x- 8, Dwarlia, Those - 1. New Delhi-77

Medical Council Registration No. Mobile No. Email ID MCI Registration No. Name of the College (Of the Principal/Dean) Landline No. and Name of the Principal/Dean Address for Pin code Correspondence State Speciality/ Department Name of Faculty: Designation:

)	DETAILSOFT	HE	FEACHING EXPERIENCE TILL DATE	ILLDATE	
Designation	Department	Name Institution	of Type of Institution (Govt.)	From (DD/MM/YYYY)	To (DD/MM/YYYY)	Total Experience
As Senior Resident						and John St. House
Asst. Professor						
Acen Professor						
Asso, Professor						
Professor			*			

REMARKS OF THE PRINCIPAL:

Signature & Stamp of Dean/Principal/Director

Signature of Concerned Faculty of Institute