

WALK IN INTERVIEW

Walk-in interview for the following post will be held at Microbiology Department, B.J. Medical College, Ahmedabad on **8th September 2026 at 9:30 am.**

Candidate should remain present with application, their original documents as well as one photocopy of certificates, photograph and photo-identification proof under **National Programme on Containment of Antimicrobial Resistance (AMR) Project of National Center for Disease Control (NCDC), Delhi by Ministry of Health and Family Welfare, India.**

POST:-Pharmacist-(1)

- Eligibility Criteria: Age limit: Not more than 40 years
- Essential Qualification: 12th pass in science subjects and Diploma in Pharmacy from a recognized Institution/Board.
- Desirable: Experience in dispensing and/or storage and dispensing of drugs in a reputed hospital or institution or in a drug store or a pharmaceutical concern.
- Remuneration of Rs.25000/- per month consolidated .No other allowances are permissible.

Roles and Responsibilities:

1. Perform antibiotic consumption studies and prescription audits
2. Data analysis and dissemination of antibiotic consumption reports and responding to specific requests concerning the database
3. Participate in the trainings and workshop conducted by NCDC
4. Any other duties required under the programme as assigned by the HOD/AMR nodal officer

The above mentioned post is purely on contractual basis.

NK
22/8/26
PROFESSOR & HEAD
DEPT. OF MICROBIOLOGY
B. J. MEDICAL COLLEGE
AHMEDABAD-380016

Dr. Anuradha Gandhi
22/8/26
Dr. Anuradha Gandhi
MD (Pharmacology)
Professor & Head
Department of Pharmacology
B. J. Medical College,
Ahmedabad-380016
AHMEDABAD-380016

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B.J. Medical College,
Ahmedabad

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Ahmedabad

**NATIONAL PROGRAMME ON CONTAINMENT OF ANTIMICROBIAL RESISTANCE OF NATIONAL CENTER
FOR DISEASE CONTROL(NCDC),DELHI BY MINISTRY OF HEALTH AND FAMILY WELFARE, INDIA.
DEPARTMENT OF MICROBIOLOGY, B. J. MEDICAL COLLEGE, CIVIL HOSPITAL,AHMEDABAD – 380016**

BIO-DATA

Recent
passport size
photograph

1. Name of the Post, applied for : _____
2. Name of the Project : _____
3. Name in full (In BLOCK LETTERS) : _____
(SURNAME) (NAME) (FATHERS NAME)
4. Mother's Name : _____
5. Father's Name : _____
6. Husband's Name : _____
7. Guardian Name & Phone No. : _____
8. Address for Correspondence : _____
(With Telephone / Mobile No & E-mail ID) _____

9. Permanent Address : _____

10. Date of Birth : _____ Age: _____
11. Marital Status : Married / Unmarried
12. Educational Qualifications : _____

Sr. No.	Examination Passed	Grade	Year of Passing	Board / University	Specialization

13. Work Experiences :

Sr. No.	Period From	Period To	Total Period	Post Held & Scale of Pay	Name of the Employer	Reason for Leaving

14. If selected what period would you require joining the post: _____

15. If selected the candidate will have to provide fitness certificate from an authorized medical practitioner.

I hereby declare that the particulars furnished in this form by me are true to the best of my knowledge and belief.

Date: _____

Place: _____

Signature of Candidate