

	<p style="text-align: center;">REGIONAL OFFICE MAHARASHTRA EMPLOYEES' STATE INSURANCE CORPORATION PANCHDEEP BHAVAN : 108, N. M. Joshi Marg, Lower Parel : MUMBAI-400 013 (An ISO 9001-2008 certified organization)</p>	<p>Website : www.esicmaharashtra.gov.in email:rd-maharashtra@esic.nic.in Phone:- 61209700 Fax:- 24921701</p>
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**RECRUITMENT OF MULTI TASKING STAFF (M.T.S.) FOR
MAHARASHTRA REGION**

Based on the Written examination held on 29.04.2012 for the post of Multi Tasking Staff (M.T.S.) in Employees' State Insurance Corporation, Maharashtra Region, candidates with following Roll Number have been selected provisionally subject to submission of original certificates in support of their Qualification, Age, SC/ST/OBC, Disability, Ex-Servicemen discharge certificate issued by the competent authority in the proforma prescribed for appointment to the posts under the Government of India.

Offer letters to all successful candidates are being dispatched separately.

Candidates belonging to SC,ST, OBC category are required to submit their latest caste certificates issued by competent authority duly revalidated.

Further candidates belonging to OBC category are required to submit caste certificate in prescribed format as mentioned in GOI Dept. of Per. & Trg. O.M. No. 36033/28/94-Estt, (Res.), dated 2-7- 1997 in the prescribed proforma (Annexure I).

Person with disabilities shall be required to submit disability certificate issued by the Medical Board constituted by the Central/ State government in the prescribed proforma (Annexure II)

Furthermore, all the candidates will have to submit certificate of medical fitness issued by Civil Surgeon/ District Medical Officer in the prescribed format (Annexure III/ IV).

General category:-

Sl. No.	ROLL_NO	NAME
1	26105965	MR NISHANT ..
2	27108353	MR RAHUL KUMAR JHA
3	27409182	MR UTTAM KUMAR CHOURASIA
4	27408380	MR RAVI RAJ
5	30402685	MR MRITUNJAY KUMAR
6	26401729	MR PANKAJ KUMAR
7	26402593	MR VINAY HARISHCHANDRA MUNGEKAR
8	27402818	MR DILEEP KUMAR
9	26406319	MR AMIT KUMAR
10	27408995	MR BHOLA NATH
11	30401931	MR AJEET KUMAR
12	27108289	MR KESHAV KUMAR
13	27104015	MISS PRITY RAJKUMAR BHATT
14	27408049	MR CHANDAN KUMAR
15	27402854	MR AMIT KUMAR
16	27401325	MR AJIT KUMAR
17	27405336	MR DEENBANDHU SINGH
18	49100641	MR RAJU GANGARAM NIKAM
19	27404592	MR PANKAJ KUMAR
20	27406594	MR RAJNISH KUMAR
21	27403937	MR SUJIT KUMAR
22	26401725	MR PRAMOD KUMAR

23	30203017	MR AMARDEEP MANIKRAO BORADE
24	27407527	MR MANISH KUMAR
25	26400444	MR GANESH KUMAR
26	27106310	MR DHIRAJ JAITRAM SHAHU
27	27407334	MR SUNIL KUMAR
28	27103687	MISS NIKITA OMPRAKASH BHARKE (Visually Impaired)
29	26100190	MR SANTOSH AMRITRAO LOHAR (Ex-Serviceman)
30	30102089	MR SURENDRA ANANDRAO BHILARE (Ex-Serviceman)
31	49101667	MR VIVEK VISHNUPANT KULKARNI (Ex-Serviceman)
32	26100025	MR UTTAM SONABA GAWALI (Ex-Serviceman)
33	26105960	MR SOPAN GANAPT JADHAV (Ex-Serviceman)
34	30100072	MR DILIP LAXMAN BABAR(Ex-Serviceman)
35	26103030	MR BHIM SINGH (Ex-Serviceman)
36	26101088	MR SANJAY BHASKAR SAWANT (Ex-Serviceman)
37	30101093	MR BALU BABANRAO SHINDE (Ex-Serviceman)
38	26104159	MR SURENDRA KUMAR SHRIPAT RAJBHAR (Ex-Serviceman)
39	49100698	MR DIGAMBER JAISING EDHATE (Ex-Serviceman)

Scheduled Caste category:-

Sl. NO.	ROLL_NO	NAME
1	27203554	MR RAKESH PASWAN
2	27207378	MR PANKAJ RATAN TAYADE
3	27201383	MR GAGAN CHANDRASHEKHAR BANSOD
4	27201378	MR DEEPAK VIKRAM TEMBHURNE
5	27205833	MR SHRIKANT GULAB GOSWAMI
6	27201951	MR KUNAL DHANRAJ MANKAR
7	27201112	MISS SHWETA SURESH TEMBHURNE
8	49200564	MR PRASHANT SURESH EDLABADKAR (Orthopedically Challenged)
9	26201993	MR SUBHASH DIGAMBAR JADHAV (Ex-Serviceman)

Scheduled Tribe category:-

Sl.NO.	ROLL_NO	NAME
1	27308003	MR KISHOR DEONATH SADAVARTI
2	27302505	MR ROSHANSINH BHAIRAVSINH SENGAR
3	27308282	MR RINKU KUMAR MEENA
4	27301866	MR OMPRAKASH RAMDAS NETAM
5	27308283	MR NAMO NARAYAN MEENA
6	49300200	MR SUSHIL KUMAR MEENA
7	49300199	MR KAPIL KUMAR MEENA
8	27303248	MISS KIRAN MAROTI KULSANGE
9	27307489	MR PANKAJ VINOD TUMDAM
10	26301957	MR KALU RAM MEENA
11	27307011	MR VINAYAK SHRIRAM DIHARI
12	27303314	MR NILESH MAROTRAO NARPACHE
13	27307762	MR SANDIP TUKARAM KUKADE
14	26303062	MISS JYOTI PUNJA BHANGALE
15	30303227	MISS SHRIKALA SITARAM GABHALE
16	27303745	MR RAJESH SHANKAR KANAKE
17	49300027	MR BALAJI GANPATRAO ALLADWAD
18	27302846	MR VINOD DADARAO SHERKURE
19	26305093	MR KAILASH VISHNU PRADHAN
20	27307490	MISS UPASNA SURESH KANGALE

Other Backward Classes category:-

Sl. NO.	ROLL_NO	NAME
1	27406654	MR MUKESH KUMAR
2	27405236	MR SANJAY KUMAR
3	26401730	MR RAVI RANJAN KUMAR
4	27402842	MR KUNDAN KUMAR
5	27402085	MR DEERENDRA KUMAR
6	27402845	MR MAHEAH SINGH
7	27404503	MR ARVIND KUMAR RAWANI
8	27407917	MR KUMAR ABHISHEK
9	27405493	MISS SWETA KUMARI
10	26403910	MR VISHAL PUNDLIK AHIRE
11	27404017	MR ASHOK MORESHWAR BHAJNE
12	27402449	MR MD ZUBAIR ALAM ANSARI
13	26400175	MR PRABHAKAR KUMAR
14	27401486	MR VIJAY KUMAR SAHU
15	27409419	MR AJIT KUMAR
16	27410550	MR SANJEET KUMAR
17	27408144	MR SHASHI PRAKASH
18	27409863	MR ARUN KUMAR
19	26401726	MR RAKESH KUMAR
20	27400815	MR RAJEEV KUMAR
21	27404981	MR RAKESH KUMAR
22	30400877	MR RAJEEV KUMAR
23	49401763	MISS RANJANA SHESHRAO SONAWANE
24	27409390	MR AJEET KUMAR
25	27405214	MR RAJESH MURLIDHAR CHOUDHARI
26	27407935	MISS KARUNA KANCHAN KUMARI
27	27407852	MR RAJEEV RANJAN BHARATI
28	27400218	MR VINOD CHIRKUTRAO SEMBEKAR
29	27402343	MR VIJAY CHARANDAS GAUTAM
30	27407002	MR RANJAN KUMAR
31	26404128	MR RAJEEV RANJAN
32	27402886	MR AMIT KUMAR
33	27406563	MR SURAJ KUMAR SAHU
34	27408678	MR PRASHANT PATEL
35	27410659	MR VIKAS YASWANT KAMARKAR
36	27404910	MR DHANANJAY YASHWANT CHOPKAR
37	27403500	MR SACHIN DEVCHAND BHURE
38	27404490	MR DEEPAK KUMAR
39	26400097	MR SUSHIL SURESH TELGE
40	27402827	MR INDIVAR KUMAR
41	30400876	MR PREM PRAKSH
42	26400255	MR SAH NAVNEET KUMAR RAMSURAJ
43	27405136	MISS VARSHA MANIKRAO KALE
44	27408572	MR HEMANTKUMAR SHAMRAO SHENDE
45	27406886	MR VISHWJEET KUMAR
46	27400922	MR AMIT KUMAR
47	49404244	MR RAJENDRA BHAURAO DUKARE
48	27411009	MR BHUSHAN MAROTIRAO JAMBHOLE
49	27406636	MR RATNESH KUMAR
50	27406140	MR CHANDRA BHUSHAN KUMAR
51	27400814	MR VIKRAM KUMAR
52	27404109	MR RAJESH NIRANJAN KULAT

53	27401881	MR ENAMUL HAQUE
54	26403249	MR VARMA ARVINDKUMAR LORIKPRASAD
55	27402276	MR MANISH KUMAR
56	27410254	MR GOPAL KUMAR
57	30402240	MR SATENDRA KUMAR
58	26402938	MR RAKESH KUMAR
59	27400951	MR NEETIN BABARAO DANDE
60	26403712	MR SUDHIR KUMAR
61	30402209	MR NILESH MOHAN KACHARE
62	26403637	MR SHASHI RANJAN KUMAR
63	27405712	MR NAVEEN KUMAR PODDAR
64	27404897	MR BIPIN KUMAR
65	27402412	MR SHAILESH BABULAL BHUJADE
66	49404961	MR SHIVSHANKAR SAMPATRAO PANDHARE
67	27401736	MR AMIT RANJAN
68	27405718	MR MANOJ VASANTRAO DHOTE
69	49400462	MR SANTOSH MOHAN PEDAPALLI
70	27408627	MR RAHUL KUMAR
71	26400420	MR GAUTAM KUMAR
72	27400167	MR SWAPNIL NARAYANRAO MAKDE
64	26400901	MR GANESH ANANT BORKAR
65	27400813	MR SHRIKANT PRASAD
73	49403550	MR SANJAY TOTARAM SURALKAR (Hearing Impaired)
76	27403616	MR BHOJRAM LEKHRAM LANJE (Hearing Impaired)
77	30402268	MR PATIL BALIRAM BHARAT (Visually Impaired)
78	49400056	MR BALKRISHNA PUNDLIK VISHWASE (Ex-Serviceman)
79	26403829	MR YAVVARI RAMA RAO (Ex-Serviceman)
80	30401053	MR HARI GOVINDA DAMBARE (Ex-Serviceman)

Cut off Marks for Written Test examination for different categories are shown below

Cut off Marks for UR candidates	119.25
Cut off Marks for OBC candidates	104.25
Cut off Marks for SC Candidates	111.50
Cut off Marks for ST Candidates	70
Cut off Marks for Ex-servicemen Candidates	39
Cut off Marks for Visually Impaired candidates	56.25
Cut off Marks for Orthopedically Challenged candidates	99.75
Cut off Marks for Hearing Impaired candidates	80.50

While every care has been taken in preparing the result, in order to rectify the errors, if any, the ESI Corporation reserves the rights to alter / modify /cancel the result unilaterally at any stage.

-Sd/-

Dated:15/06/2012

Additional Commissioner / Regional Director

Annexure - I

**FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES
APPLYING FOR APPOINTMENT TO POSTS UNDER THE GOVERNMENT OF
INDIA**

[G.I., Dept. of Per. & Trg., O.M. No. 36033/28/94-Estt. (Res.), dated 2-7-1997.]

This is to certify that....., son of....., of village
..... District/Division..... in theState.....belongs
to the community which is recognized as a Backward Class
under-

*(i) Government of India, Ministry of Welfare, Resolution No. 12011/68/93-BCC (C), dated the 10th September, 1993, published in the Gazette of India, Extraordinary, Part – I, Section I, No. 186, dated the 13th September, 1993.

*(ii) Government of India, Ministry of Welfare, Resolution No. 12011/9/94-BCC , dated the 19th October, 1994, published in the Gazette of India, Extraordinary, Part – I, Section I, No. 163, dated the 20th October, 1994.

*(iii) Government of India, Ministry of Welfare, Resolution No. 12011/7/95-BCC, dated the 24th May, 1995, published in the Gazette of India, Extraordinary, Part – I, Section I, No. 88, dated the 25th May, 1995.

*(iv) Government of India, Ministry of Welfare, Resolution No. 12011/44/96-BCC , dated the 6th December, 1996, published in the Gazette of India, Extraordinary, Part – I, Section I, No. 210, dated the 11th December, 1996.

Shri.....and/or his family ordinarily reside(s) in the
District/Division of theState. This is also to certify that he/she does not
belong to the persons/sections (Creamy Layer) mentioned in Column 3 of the
Schedule to the Government of India, Department of Personnel and Training, O.M.
No. 36012/22/93-Estt. (SCT), dated 8-9- 1993.

District Magistrate
Deputy Commissioner, etc.

Dated:

SEAL

*Strike out whichever is not applicable.

N.B.----- (a) The term 'Ordinarily' used here will have the same meaning as in Section 20 of the Representation of the People's Act, 1950.

(b) The authorities competent to issue caste certificates are indicated below:-

(i) District Magistrate/Additional Magistrate/Collector/Deputy Commissioner/Additional Deputy Commissioner/Deputy Collector/First Class Stipendiary Magistrate/Sub-Divisional Magistrate/Taluka Magistrate/Executive Magistrate/Extra Assistant Commissioner (not below the rank of First Class Stipendiary Magistrate)

(ii) Chief Presidency Magistrate/ Additional Chief Presidency Magistrate/Presidency Magistrate.

(iii) Revenue Officer not below the rank of Tehsildar; and

(iv) Sub-Divisional Officer of the area where the candidate and/or his family resides.

FORMAT OF DISABILITY CERTIFICATE

NAME AND ADDRESS OF THE INSTITUTE / HOSPITAL

Certificate No.

Date :

Recent
Photograph
of the candidate
showing the
disability
duly attested by
the

This is certified that Shri /Smt./ Kum. Son /wife /
daughter of Shri age sex
identification mark(s) is suffering from permanent
disability of following category:-

A. Locomotor or cerebral palsy:

- | | |
|--|---|
| (i) BL-Both legs affected but not arms. | |
| (ii) BA-Both arms affected | <ul style="list-style-type: none"> a) Impaired reach b) Weakness of grip c) Ataxic |
| (iii) BLA-Both legs and both arms affected | |
| (iv) OL-One leg affected (right or left) | <ul style="list-style-type: none"> a) Impaired reach b) Weakness of grip c) Ataxic |
| (v) OA-One arm affected | <ul style="list-style-type: none"> a) Impaired reach b) Weakness of grip c) Ataxic |
| (vi) BH-Stiff back and hips (cannot sit or stoop) | |
| (vii) MW-Muscular weakness and limited physical endurance. | |

B. Blindness or Low Vision:

- i) B-Blind
- ii) PB-Partially Blind

C. Hearing impairment:

- i) D-Deaf
- ii) PD-Partially Deaf

(Delete the category, whichever is not applicable)

2. This condition is progressive / non-progressive/ likely to improve not likely to improve. Re-assessment of this case is not recommended / is recommended after a period of..... years..... Months*.

3. Percentage of disability in his /her case is..... per cent.

4. Shri / Smt. /Kum meets the following physical requirements for discharge of his/ her duties:

- i) F-can perform work by manipulation with fingers Yes / No
- ii) PP-can perform work by pulling and pushing. Yes / No
- iii) L- can perform work by lifting. Yes / No
- iv) KC- can perform work by kneeling and crouching. Yes / No
- v) B- can perform work by bending. Yes/ No
- vi) S- can perform work by sitting. Yes / No
- vii) ST- can perform work by standing. Yes / No
- viii) W- can perform work by walking. Yes / No
- ix)SE- can perform work by seeing. Yes / No
- x) H- can perform work by hearing / speaking. Yes / No
- xi) RW- can perform work by reading and writing. Yes / No

(Dr.)

(Dr.)

(Dr.)

Member
Medical Board

Member
Medical Board

Chairperson
Medical Board

Countersigned by the
Medical Superintendent / CMO/
Head of Hospital (with seal)

*Strike out which is not applicable.

MEDICAL CERTIFICATE

I hereby certify that I have examined Shri/Smt/Kum _____
_____ a candidate for employment in the Employees' State
Insurance Corporation and can not discover that Shri/Smt/Kum _____
has any disease (communicable or otherwise), constitutional weakness or bodily
infirmity.

I do not consider this a disqualification for employment in the Office of the
Employees' State Insurance Corporation.

* He/She has deformity or defect which may hinder him/her in working as Multi
Tasking Staff

* He/She has no deformity or defect which may hinder him/her in working as Multi
Tasking Staff

Mark of identification: 1) _____

2) _____

Signature & L.H.T.I. of
the candidate.

Civil Surgeon or District Medical Officer of Govt. hospital
or Medical Superintendent of ESIC Hospital

*Strike out which is not applicable

CANDIDATE'S STATEMENT & DECLARATION

The candidate must make the statement required below prior to his /her medical examination and must sign the declaration appended thereto. His/ her attention is specially directed to the warning contained in the Note below:-

1. State your name in full :
(in block letters)
2. State your age and place of birth :
- 3.(a) Have you ever had small-pox intermittent, or any other fever enlargement or suppuration of glands, spitting of blood, asthma, heart disease, lung disease, fainting attacks, rheumatism, appendicitis ?:
- (b) Any other disease or accident requiring confinement to bed and medical or surgical treatment ?
4. When were you last vaccinated? :
5. Have you or any of your near relations been afflicted with consumption, scrofula, gout, asthma, fits, epilepsy or insanity ?
6. Have you been examined and declared fit for Govt. Service by a Medical Officer/Medical Board, within last three years ?
7. Have you suffered from any form of nervousness due to over work or any other cause ?
8. Furnish the following particulars concerning your family :
 - (a) Father's age, if living and state of health :
 - (b) Father's age at death and cause of death :
 - (c) No. of brothers living, their ages and state of health :
 - (d) No. of brothers dead, their age at death and cause of death :
 - (e) Mother's age, if living, and state of health :
 - (f) Mother's age at death and cause of death :
 - (g) No. of sisters living, their ages and state of health :
 - (h) No. of sisters dead, their age at death and cause of death :

I declare that all the above answers to be, to the best of my belief, true and correct.

I also solemnly affirm that I have not received a disability certificate/pension on account of any disease or other condition.

Candidate's signature _____
 Sign. in my presence _____
 Signature & Seal of Medical Officer _____

****Note:** The candidate will be held responsible for the accuracy of the above statement. By willfully suppressing any information, he/she will incur the risk of losing the appointment and, if appointed, or forfeiting all claim to superannuation allowance or gratuity.