

**"ANNEXURE-A"**  
**RECRUITMENT FOR THE POST OF PART TIME SPECIALISTS & PART TIME SUPER SPECIALISTS ON CONTRACT BASIS FOR ESI HOSPITALS, MAHARASHTRA.**

Post \_\_\_\_\_ Speciality \_\_\_\_\_

Paste your recent passport size Photograph Self attested

1. Name : \_\_\_\_\_

2. Date of Birth \_\_\_\_\_ Marital Status \_\_\_\_\_

3. Address : \_\_\_\_\_

4. Contact No. \_\_\_\_\_ E-Mail \_\_\_\_\_

5. Category (UR/SC/ST/OBC): \_\_\_\_\_

6. M.B.B.S. (Year of Passing) : \_\_\_\_\_

7. Post Graduation (Degree/Diploma) : \_\_\_\_\_

Sr.	Degree / Diploma	Year of Passing	University / Institute
1			
2			
3			

8. Medical Council Registration No. \_\_\_\_\_

9. Name of Medical Council \_\_\_\_\_

10. Experience :

Sr.	Designation & Institute	From	To	Period
1				
2				
3				

11. Presently working as Designation \_\_\_\_\_ Name if Institution \_\_\_\_\_  
 Govt. /Private \_\_\_\_\_

12. NOC certificate from present employer taken /PO copy available \_\_\_\_\_

13. Option of Place of posting if any preference wise \_\_\_\_\_  
 (only for Part Time Specialists)

I hereby declare that the information given about is true /correct to the best of my knowledge and belief. In case of any information is found false, incorrect of the later stage of the recruitment /appointment shall be heard by the decision of ESI Corporation.

Date & Place \_\_\_\_\_

(Signature of Candidate)