



मॉडल एवं सुपर स्पेशलिटी अस्पताल, कर्मचारी राज्य बीमा निगम

MODEL AND SUPER SPECIALITY HOSPITAL, EMPLOYEES' STATE INSURANCE CORPORATION

आश्रमम, कोल्लम, केरल -691 002, ASRAMAM, KOLLAM, KERALA -691002

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ESIC  
Chinta Se Mukti

No. 542/U/11/11/1/10 Contract Officers

Date :- 12/09/2018

**NOTIFICATION**

**WANTED CLERKS ON CONTRACT**

**WALK IN INTERVIEW – ON 04.10.2018 AT 11 AM**

Applications are invited for walk in interview in the post of clerks on contract basis in ESIC Super Specialty Hospital , Asramam, Kollam for a period of **six months or till regular incumbents join, whichever is earlier**. Those who retired from ESIC / Central /State Government Organizations/ Public Sector Undertakings Autonomous Bodies are eligible to attend the interview. The engagement will be purely on contractual basis with a provision for termination giving due notice. While considering the application , the Annual Appraisal report for the last five years in respect of the applicant would be taken into consideration and none of the officials in respect of whom charge sheet issued / penalty imposed during the last five years will be considered for engagement. An undertaking to this effect will be required to be submitted by the candidate at the time of application , which will be subjected to verification from the office / hospital where he / she was working. The candidates must bring the original documents for verification at **9.30 AM** sharp on the date of the interview.

Sl. No	Name of Post	No.of Posts	Age	Remuneration	Qualification
1	Clerks	-4-	Should not exceed 62 years	Fixed remuneration of Rs. 19900/- subject to the condition that total pension plus remuneration should not exceed the last pay including DA drawn at the time of retirement .	Retired Officials from ESIC / Central / State Government Organizations , Public Sector Undertakings/Autonomous Bodies. The candidate should have retired from the ministerial cadre/ corresponding post.

Sd/-

**MEDICAL SUPERINTENDENT**

**BIO DATA**  
**POST - CLERK (CONTRACT)**

Passport  
size  
photo

1	NAME	
2	DATE OF BIRTH	
3	AGE ON DATE OF APPLICATION	
4	OFFICE WHERE PREVIOUSLY WORKED	
5	DATE OF RETIREMENT	.....Years.....Months..... Days
6	LAST PAY DRAWN (Pls. Attach a Copy of LPC)	
7	TOTAL <b>PENSION+DA</b> BEING DRAWN AT PRESENT	
8	PRESENT ADDRESS	
9	PERMANENT ADDRESS	
10	CONTACT TELEPHONE NO. (LAND LINE AND MOBILE)	
11	WHETHER COMPUTER LITERATE OR NOT	
12	NATURE OF DUTIES ABLE TO PERFORM	
13	SIGNATURE WITH DATE	

Testimonials to be enclosed:-

1. APAR – Last five years.
2. Undertaking from the office / hospital where he / she was working as per notification.
3. Last Pay Certificate.
4. Certificates to prove Qualification and Age.