



E.S.I.C. MODEL HOSPITAL
(MINISTRY OF LABOUR AND EMPLOYMENT, GOVT. OF INDIA)
कर्मचारी राज्य बीमा निगम आदर्श हस्पताल
(श्रम एवं रोजगार मंत्रालय, भारत सरकार)
BHARAT NAGAR, LUDHIANA- 141001, भारत नगर, लुधियाना-141001
(ISO 9001: 2008 QMS CERTIFIED)/आई एस ओ 9001: 2008 प्रमाणित
E-mail: ms-ludhiana@esic.nic.in; Website: <http://www.esichospitals.gov.in>
☎:- 0161-2403393

ESIC
Chinta Se Mukti

No. 122-A-12/13/3/04-MHL

Dated: 14.06.2019

WALK-IN-INTERVIEW ON DT. 16.07.2019 FOR RECRUITMENT TO THE POST OF:

1. Senior Residents under Residency Scheme for three years subject to renewal/extension every year for ESIC Model Hospital, Ludhiana:-

Note:- One post is reserved for Person with Disability as per Centre Govt. Rules & remaining are for all eligible candidates.

| Sr. No. | Department | UR | SC | OBC | ST | Vacancy | Categories of disable, suitable for job (for PH only) |
|---------|---------------|----|----|-----|----|---------|---|
| 1 | Anaesthesia | - | - | 1 | 1 | 2 | OL |
| 2 | ENT | - | 1 | - | - | 1 | OL |
| 3 | Gen. Medicine | 2 | 1 | 1 | - | 4 | OL |
| 4 | Gen. Surgery | - | - | 2 | 1 | 3 | ND |
| 5 | ICU | - | - | 1 | - | 1 | - |
| 6 | Obs. & Gynae | - | 1 | 2 | 1 | 4 | ND |
| 7 | Orthopaedics | 2 | - | 1 | 1 | 4 | ND |
| 8 | Paediatrics | 3 | 1 | 3 | - | 7 | OL |
| 9 | Pathology | - | - | 1 | - | 1 | OL, OA |
| 10 | Radiology | 1 | - | - | - | 1 | OL |

(OL – One leg affected, OA – One Arm affected but coordinated movement both hands should be adequate, ND – Not identified suitable for PH.)

2. Senior Residents *on contract basis for 39 days extendable by another 39 days for ESIC Model Hospital, Ludhiana**

Note:- One post is reserved for Person with Disability as per Centre Govt. Rules & remaining are for all eligible candidates.

| Sr. No. | Department | Vacancy |
|---------|--------------|---------|
| 1 | Anaesthesia | 1 |
| 2 | Casualty | 2 |
| 3 | Gen. Surgery | 2 |
| 4 | ICU | 4 |
| 5 | Orthopaedics | 1 |
| 6 | Pathology | 1 |
| 7 | Psychiatry | 1 |

***Note:** Any candidate may be considered for walk-in-interview irrespective of category, for engaging Senior Residents for 39 days extendable by another 39 days subject to fulfillment of Essential Qualifications and other conditions.



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Note:- For No. 3 & 4 - One post is reserved for Person with Disability as per Centre Govt. Rules & remaining are for all eligible candidates.

3. Part Time Super Specialists on contract basis* for ESIC Model Hospital, Ludhiana:-

| Sr. No. | Department | UR | SC | OBC | ST | Vacancy | Categories of disable, suitable for job (for PH only) |
|---------|------------------|----|----|-----|----|---------|---|
| 1 | Cardiology | - | - | 1 | - | 1 | OL |
| 2 | Gastroenterology | - | - | 1 | - | 1 | OL |
| 3 | Endocrinology | - | - | 1 | - | 1 | ND |
| 4 | Neurology | - | - | - | 1 | 1 | ND |

4. Full Time /Part Time Specialists on contract basis* for ESIC Model Hospital, Ludhiana:-

| Sr. No. | Department | UR | SC | OBC | ST | Vacancy | Categories of disable, suitable for job (for PH only) |
|---------|--------------|----|----|-----|----|---------|---|
| 1 | Anaesthesia | - | - | 1 | - | 1 | OL |
| 2 | Biochemistry | - | - | - | 1 | 1 | OL |
| 3 | Dermatology | - | - | 1 | - | 1 | OL |
| 4 | Microbiology | 1 | - | - | - | 1 | OL, OA |
| 5 | Pediatrics | - | 1 | - | - | 1 | OL |
| 6 | Pathology | - | - | 1 | - | 1 | OL, OA |
| 7 | Radiology | 1 | - | 1 | - | 2 | OL |
| 8 | Orthopaedics | - | - | 1 | - | 1 | ND |

(OL – One leg affected, OA – One Arm affected but coordinated movement both hands should be adequate, ND – Not identified suitable for PH.)

Note:- Reservation as per Central Govt. rules.



कराबीनि
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Essential Qualifications:-

| | Full Time / Part time Specialist | Senior Resident | Super Specialist |
|---|---|---|---|
| Qualification | PG Degree/ Diploma with 3 years /5 years work experience in concerned specialty. Candidate must be registered with Medical Council of India or State Medical Council*. (Eligibility for Biochemistry:- MBBS with MD/ Diploma in Biochemistry with 3 years/ 5 years work experience in concerned specialty) | 1. P.G. Degree or Diploma in concerned Specialty from recognized university, registered with Medical Council of India or State Medical Council*. Candidate who have already completed 03 years Senior Residency will be engaged on annual contract basis. Note: - 1. For Senior Resident (Radiology) candidates with only PG Degree/ Diploma will be considered. 2. For Senior Resident (Casualty), Degree/ Experience in General Medicine will also be considered. | 1. Post Graduation qualification in the concerned specialty. Candidate must be registered from Medical Council of India or State Medical Council*. 2. DM/ M.ch in the concerned Super Specialty. |
| Age as on the date of interview | Age not exceeding 45 years for Full Time Specialist and not exceeding 65 for Part Time Specialists as on date of interview. Relaxation as per rule. | Age Not exceeding 37 years. Relaxation as per rule. | Age not exceeding 65 years. Relaxation as per rule. |
| Emoluments | Pay and Allowances as per rules and ESIC Headquarters office orders from time to time. | | |
| * Candidates must be registered with Punjab Medical Council | | | |

How to Apply:-

- The eligible and desirous – fulfilling the educational qualifications/ eligibility conditions should appear for walk-in-interview with their application along with one set of self-attested copies of the relevant documents in support of age, qualifications, Attempt certificate, Marks Sheet, Degree, MCI/ State Registration, SC/ST/OBC/PH Certificate & Experience certificate etc. and two recent passport size photographs. The candidate who is currently in the employment must bring experience certificate/ NOC (working certificate) failing which his/ her candidature liable to rejection.
- Applicants are advised to report to the office of Medical Superintendent, ESIC Model Hospital, Bharat Nagar, Ludhiana on **16.07.2019** accordingly for interview as mentioned above upto **10.00 AM** and candidates who will report after prescribed time are liable for rejection.
- No TA/DA will be paid to the candidates for appearing in the interview.**

Note:-

- Number of above vacancies may increase/decrease.
- Candidates claiming reservation/age relaxation on grounds of belonging to OBC should submit the community certificate in prescribed proforma vide Govt. Of India, Department of Personnel Training OM No. 36012/22/93-EST (SCT) dated 08/09/93 which is modified vide OM No.- 36033/3/2004 Estt. (Res.) dated 09/3/2004 or the latest notification of the Government of India if any failing which the benefit of reservation/ relaxation will not be given or their application shall be rejected and no request/ correspondence will be entertained.**

Sd/-
MEDICAL SUPERINTENDENT



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APPLICATION FOR THE POST OF SENIOR RESIDENT UNDER RESIDENCY SCHEME FOR SPECIALITY _____.

Paste your recent passport size

01. Name in full (in Block Letters): _____

02. Father's/Husband's Name: _____

03. Date of Birth (In Christian Era: (In figures) _____

(In words _____)

04. Are you a citizen of India by birth and / or domicile: _____

05. Permanent address (In Block letters) _____

PIN CODE: _____

06. Mailing Address _____

PIN CODE: _____

Mobile No. - _____ E-mail ID _____

07. Category you belong to

Code of Category (UR-01, SC-02, OBC-03, ST-4)

| | |
|--|--|
| | |
|--|--|

08. Educational Qualification: -

| Sr. No. | Qualification | University/Board | % age of Marks obtained | No. of attempts. |
|---------|------------------------------|------------------|-------------------------|------------------|
| 1 | MBBS (% age all professions) | | | |
| 2 | PG Degree | | | |
| 3 | PG Diploma | | | |

09. Experience / particulars of previous and present employment.

| Sr. No. | Name and Full address of the employer | Designation | Period of employment | | Total Experience |
|---------|---------------------------------------|-------------|----------------------|----|------------------|
| | | | From | TO | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

10. List of Enclosures:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

I hereby declare that the information furnished as above in the application is true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect at any stage, my candidature/appointment is liable to outright cancellation/termination without notice or any compensation in lieu thereof.

Date

Place

Signature the candidate

Name _____



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APPLICATION FOR THE POST OF SENIOR RESIDENT ON CONTRACT BASIS FOR SPECIALITY

Paste your recent
passport size

01. Name in full (in Block Letters): _____

02. Father's/Husband's Name: _____

03. Date of Birth (In Christian Era: (In figures) _____

(In words _____)

04. Are you a citizen of India by birth and / or domicile: _____

05. Permanent address (In Block letters) _____

PIN CODE: _____

06. Mailing Address _____

PIN CODE: _____

Mobile No. - _____ E-mail ID _____

07. Category you belong to category code

| | |
|--|--|
| | |
|--|--|

Code of Category (UR-01, SC-02, OBC-03, ST-4)

08. Educational Qualification: -

| Sr. No. | Qualification | University/Board | % age of Marks obtained | No. of attempts. |
|---------|------------------------------|------------------|-------------------------|------------------|
| 1 | MBBS (% age all professions) | | | |
| 2 | PG Degree | | | |
| 3 | PG Diploma | | | |

09. Experience / particulars of previous and present employment.

| Sr. No. | Name and Full address of the employer | Designation | Period of employment | | Total Experience |
|---------|---------------------------------------|-------------|----------------------|----|------------------|
| | | | From | TO | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

10. List of Enclosures:

- | | |
|----|----|
| 1. | 4. |
| 2. | 5. |
| 3. | 6. |

I hereby declare that the information furnished as above in the application is true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect at any stage, my candidature/appointment is liable to outright cancellation/termination without notice or any compensation in lieu thereof.

Date

Place

Signature the candidate

Name _____



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APPLICATION FOR THE POST OF SENIOR RESIDENT ON CONTRACT BASIS FOR 39 DAYS. SPECIALITY

Paste your recent
passport size

01. Name in full (in Block Letters): _____

02. Father's/Husband's Name: _____

03. Date of Birth (In Christian Era: (In figures) _____

(In words _____)

04. Are you a citizen of India by birth and / or domicile: _____

05. Permanent address (In Block letters) _____

PIN CODE: _____

06. Mailing Address _____

PIN CODE: _____

Mobile No. - _____ E-mail ID _____

07. Category you belong to category code

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Code of Category (UR-01, SC-02, OBC-03, ST-4)

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| Sr. No. | Qualification | University/Board | % age of Marks obtained | No. of attempts. |
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| Sr. No. | Name and Full address of the employer | Designation | Period of employment | | Total Experience |
|---------|---------------------------------------|-------------|----------------------|----|------------------|
| | | | From | TO | |
| | | | | | |
| | | | | | |
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Date

Place

Signature the candidate

Name _____