



चिंता से मुक्ति

कर्मचारी राज्य बीमा निगम मॉडल अस्पताल

E.S.I CORPORATION MODEL HOSPITAL

इंडस्ट्रियल एरिया, फेज-II राम दरबार, चंडीगढ़-160002

INDUSTRIAL AREA, PHASE-II, RAMDARBAR, CHANDIGARH-160002

(ISO 9901:2015 CERTIFIED आई.एस.ओ. 9001:2015 प्रमाणित)



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Dated: 23.07.2018

WALK-IN INTERVIEW

MS, ESIC Model Hospital Chandigarh hereby invites applications for the vacancy, in respect to the following posts:-

The interview will be scheduled on **02.08.2018** at **11:30 AM** after the scrutiny of applications.

1. **Part Time Specialist (Pulmonary Medicine) for One Year Contract (Four hours per day and five days a week) or till regular specialists join duty.**

VACANCY	01(UR)
AGE	Not exceeding 64 years as on date of interview. Relaxation as per rule.
EDUCATIONAL QUALIFICATION	PG Degree in Pulmonary Medicine or equivalent with 3 years experience in respective specialty/PG Diploma with 5 years experience in respective specialty.
PAY	Rs. 40000/- (Consolidated) per month additional Rs. 8000/- per month if willing to perform emergency call. Rs. 1,000/- for Extra session of Two Hours.

2. **Homeopathy Part Time Physician for One Year Contract (Five hours per day and six days a week).**

VACANCY	01(UR)
AGE	Not exceeding 30 years as on date of interview. Relaxation as per rule.
EDUCATIONAL QUALIFICATION	B.H.M.S. Degree from a recognized University.
PAY	Rs. 50000/- (Consolidated).

HOW TO APPLY:-

- Candidates fulfilling the educational qualification & other eligibility conditions should submit their application with one set of self attested copies of the relevant documents (as listed under CHECKLIST on the last page) along with Annexure 'A' which is available with this document.
- Candidates should report in the office of Medical Superintendent, ESIC Model Hospital, Industrial Area Phase-II, Ramdarbar Chandigarh at 9.00 A.M. on the stipulated date.
- **Documents will be accepted for scrutiny strictly till 11.00 A.M. Candidates found eligible will be called for interview. Candidates reporting after 11.00 A.M. will not be entertained for walk-in-interview.**

TERMS & CONDITIONS:-

1. The Medical Superintendent reserves the right to fill all or none vacancies, to alter the date or cancel the interview without any prior notice.
2. The number of vacancies may be changed without any previous notice.
3. Reservations will prevail as per Central Government Rules.
4. No TA / DA will be paid to candidates for either appearing in the walk-in-interview or joining the post.

5. For any further information / candidates are requested to continuously check the website www.esic.nic.in. No information shall be given through any other sources.
6. Selected Candidate will have no claim for regularization of the service at ESIC Model Hospital Chandigarh.
7. Selected candidates will have to join within Seven days from the date of receipt of the Selection order.
8. The Selected Candidates will have to furnish a DD/ Bankers Cheque for an amount of Rs. 25,000/- (Rupees Twenty Five Thousand Only) drawn in favor of 'ESIC A/c No 1' payable at Chandigarh, towards security deposit, which is refundable after completion of contract. However, this amount will be appropriated towards administrative cost in case, the candidate resigns / terminates his/her contract within Nine months of the commencement of the contract with or without prior notice and without one month's notice thereafter.
9. The selection is subject to the candidates proving their medical fitness & verification of their Character & Antecedents.
10. Private practice is strictly not allowed as the selected candidates will be in receipt of Non Practice Allowance. If found guilty, suitable action as provided under the relevant rules shall be taken.
The appointment shall not offer any right or preferences for regular appointment.
11. In case regular candidate in, the appointment shall be terminated as per the condition of the contract.
12. No claim for any service benefit like PF, Pension, Gratuity, Medical Allowance, Seniority, Promotion and leave will be admissible.
13. Candidate seeking reservation benefits for SC/ST/OBC must ensure that they are entitled to such reservation as per eligibility prescribed by the GOI. They should also be in possession of the required certificates in the prescribed format in support of their claim as stipulate in this Notice at Annexure 'B'. OBC candidates should ensure that they are in possession of valid OBC Certificate issued within the due date issued by the authority mentioned in the CHECKLIST.
14. On selection candidates have to open a Saving Bank Account in State Bank of India (any Branch). This is applicable in cases where Saving Bank Account is not held in State Bank of India.
15. The decision of the Selection Board will be final on all of aspects of selection and no further correspondence will be entertained under any circumstance.

CHECKLIST

(DOCUMENTS TO BE SUBMITTED WITH APPLICATION FAILING WHICH APPLICATION SHALL BE SUMARRILY REJECTED):-

- I. Matriculation certificate as proof of age.
- II. Permanent Registration with MCI / State Medical Council.
- III. MD / DIPLOMA / DNB Degree / MBBS Degree.
- IV. Attempt Certificates and Marks Sheet of MD / DIPLOMA / DNB / MBBS.
- V. Experience Certificate, wherever required.
- VI. NOC from present employer, if applicable.
- VII. Caste Certificate (if applicable) in the prescribed format of GOI issued on or after 01/04/2017 by the Competent Authority of the State / GOI.
- VIII. Two recent passport size photographs.
- IX. Self attested copy of Aadhaar / other document.
- X. Annexure 'A', 'B' & 'C' (Total Four Sheets).

MEDICAL SUPERINTENDENT

APPLICATION FORM

POST FOR WHICH APPLYING _____

1. NAME (IN BLOCK LETTERS) _____

2. FATHER'S/HUSBAND'S NAME _____

3. DATE OF BIRTH _____

4. CITIZENSHIP _____

5. PERMANENT ADDRESS _____

6. CORRESPONDENCE ADDRESS _____

7. AADHAAR NO. _____

8. E-MAIL _____

9. TELEPHONE & MOBILE NUMBER _____ \

10. AGE AS ON DATE OF WALK-IN-INTERVIEW _____ YEARS _____ MONTHS _____ DAYS

11. WHETHER SC/ST/OBC/GENERAL/PH _____

12. EDUCATIONAL/PROFESSIONAL QUALIFICATION:

DEGREE/DIPLOMA/PG DEGREE/B.H.M.S ETC.	YEAR OF PASSING	UNIVERSITY	NO. OF ATTEMPTS	REMARKS
ANY OTHER QUALIFICATION				

Please affix a recent colour passport size photograph with your signature across

13. WORK EXPERIENCE

SR. NO.	POST HELD	INSTITUTION	PERIOD DATES(FROM---TO)	TOTAL PERIOD (IN MONTHS /YEAR)

14. WHETHER WORKED/WORKING AS SENIOR RESIDENT, IF APPLICABLE, IN

CENTRAL/STATE GOVERNMENT (YES OR NO): _____

IF YES, (i) PERIOD OF SR SHIP FROM _____ TO _____

(ii)NAME OF ORGANIZATION & ADDRESS _____

15. MCI/STATE REGISTRATION CERTIFICATE NO. _____

16. HAVE YOU EVER BEEN DISMISSED OR PUNISHED: _____

DECLARATION

I do hereby declare that all the statements made by me in this application are true, complete and correct to the best of my knowledge and belief. I am full aware that in the event of any particulars or information furnished by me is found to be false/incomplete/incorrect or ineligible or for indulging in some unlawful act, my candidature for the post is liable to be rejected/cancelled and in the event of any statement / information found false/incorrect even after my appointment, my services are liable to be terminated without any notice.

DATE:

PLACE:

SIGNATURE OF THE CANDIDATE

CHECK-LIST OF ENCLOSURES (SELF ATTESTED):

- | | |
|---|----------|
| 1. MATRICULATION CERTIFICATE AS PROOF OF AGE | (YES/NO) |
| 2. PERMANENT REGISTRATION WITH MCI / STATE MEDICAL COUNCIL | (YES/NO) |
| 3. MD / DIPLOMA / DNB DEGREE / B.H.M.S. DEGREE / MBBS DEGREE | (YES/NO) |
| 4. ATTEMPT CERTIFICATES AND MARKS SHEET OF MD / DIPLOMA / DNB/MBBS. | (YES/NO) |
| 5. EXPERIENCE CERTIFICATE, WHEREVER REQUIRED | (YES/NO) |
| 6. NOC FROM PRESENT EMPLOYER, IF APPLICABLE | (YES/NO) |
| 7. TWO RECENT PASSPORT SIZE PHOTOGRAPHS | (YES/NO) |
| 8. SELF ATTESTED COPY OF AADHAAR / OTHER DOCUMENT | (YES/NO) |
| 9. ANNEXURE 'A', 'B' & 'C' (FOUR SHEETS). | (YES/NO) |

SIGNATURE OF THE CANDIDATE

