



E.S.I.C. MODEL HOSPITAL
कर्मचारी राज्य बीमा निगम मॉडल हस्पताल
BHARAT NAGAR, LUDHIANA – 141001
भारत नगर, लुधियाना.141001

(AN ISO 9001: 2008 QMS CERTIFIED)/ आई एस ओ 9001: 2008 प्रमाणित
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No. 122-A-12/13/3/04-MHL

Dated:- 18.10.2018

APPLICATIONS ARE INVITED FOR INTERVIEW 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	-	-	2	1	3	OL
2	ENT	-	1	-	-	1	OL
3	Gen. Medicine	1	1	1	-	3	OL
4	Gen. Surgery	-	-	1	1	2	ND
5	ICU	-	-	1	-	1	-
6	Obs. & Gynae	-	1	2	1	4	ND
7	Orthopaedics	-	-	1	1	2	ND
8	Paediatrics	1	1	3	-	5	OL
9	Pulm. Medicine	1	-	-	-	1	OL
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* against IMO 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	Casualty	1	-	1	-	2	-
3	ENT	1	-	-	-	1	OL
4	Ophthalmology	-	-	1	-	1	ND
5	Gen. Surgery	-	-	1	-	1	ND
6	Obs. & Gynae	-	-	1	-	1	ND
7	Orthopaedics	-	1	1	-	2	ND
8	Paediatrics	-	-	1	-	1	ND
9	Psychiatry	-	-	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.)

Note:- If no eligible candidates are available against the respective categories mentioned as above, then any other candidate (if present), may be considered for walk-in-interview irrespective of category, for engaging Senior Residents for 39 days extendable by another 39 days.

Note:- For No. 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	-	2	OL
2	Biochemistry	-	-	-	1	1	OL
3	Dermatology	-	-	1	-	1	OL
4	Radiology	1	-	1	-	2	OL
5	Pathology	-	-	1	-	1	OL, OA

(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.

5. Homeopathy Physician on contract basis for ESIC Model Hospital, Ludhiana – 01

* For 1 year or till the regular incumbent joins.

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.

Essential Qualifications:-

	Full Time / Part time Specialist	Senior Resident	Super Specialist	Homeopathy
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*. <u>(Eligibility for Biochemistry:-</u> 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*. If such candidates are not available, candidates without PG Qualification having at least 2 years experience, after MBBS (experience post registration with Medical Council India or State Medical Council*) will be only considered out of which having worked for 1 year in concerned Specialty. 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/Mch in the concerned Super Specialty.	1. Degree in Homeopathy of Recognized University/ Statutory State Board/ Council or equivalent recognized under the Homeopathic Central council Act, 1973 (59 of 1973). 2. Enrolment on the Central register of Homeopathy or a State Register of Homeopathy. 3. Candidate should have passed the Punjabi Subject of middle standard
<u>Age as on the last date of application</u>	Age not exceeding 40 years for Full Time Specialist and not exceeding 65 for Part Time Specialists. Relaxation as per rule.	Age Not exceeding 37 years. Relaxation as per rule.	Age not exceeding 65 years. Relaxation as per rule.	Not exceeding 30 years for Homeopathy Physician. Relaxation as per rule.
<u>Emoluments</u>	1) Full Time Specialists:- Basic Pay 18750/- + Grade Pay Rs. 6600/-, DA, HRA and NPA as admissible or as per orders issued by ESIC Hqrs. Office from time to time. 2) Part Time Specialist - Rs.40,000/- consolidated per month for two sessions of 2 hours each per day into five days in a week + Rs. 8000/- for emergency calls or as per orders issued by ESIC Hqrs. Office from time to time. For extra session of two hours – Rs. 1,000/-.	1. SR under residency scheme:- Basic Pay Rs. 67,700/- plus allowances as admissible. Or as per order issued by ESIC Hqrs. Office from time to time. It would be reduced by Rs. 600/- Per month for Diploma Holders and the same will be reduced by Rs. 1210/- per month for non PG candidates. Or as per order issued by ESIC Hqrs. Office from time to time 2. SR on contract basis:- Basic Pay Rs. 18750/- + Grade Pay – Rs. 6600/- plus allowances as admissible. Or as per order issued by ESIC Hqrs. Office from time to time. It would be reduced by Rs. 600/- Per month for Diploma Holders and the same will be reduced by Rs. 1210/- per month for non PG candidates. Or as per order issued by ESIC Hqrs. Office from time to time	3. Rs. 60,000/- per month for three hour session per day for five days in a week. 4. For giving undertaking to be available for emergency call duty after the schedule timing – Rs. 10,000/- per month. 5. For extra session of two hours – Rs. 2,000/-	Rs. 50,000/- Consolidated per month for 5 hours per day and six days a week.
	* 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 alongwith 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.
- Applications should reach the office of Medical Superintendent, ESIC Model Hospital, Bharat Nagar, Ludhiana on or before **29.10.2018 upto 04.00 PM** . List of candidates eligible after scrutiny and date of interview will be uploaded on website www.esichospitals.gov.in. No TA/DA will be paid to the candidates for appearing in the interview.

Sd/-
MEDICAL SUPERINTENDENT

APPLICATION FOR THE POST OF SUPER SPECIALIST (PART TIME) 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 _____)

(a) Age as on _____

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

05. Permanent address (In Block letters)

Telephone No: (Land Line) _____ Mobile No. - _____ PIN CODE: _____

06. Mailing address (In Block letters)

Telephone No: (Land Line) _____ Mobile No. - _____ PIN CODE: _____

E-mail ID _____

07. Category you belong to

category code

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

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08. Educational Qualification:-

Sr. No.	Qualification	University/Board	% age of Marks obtained	No. of attempts.
1	PG Degree			
2	DM/ MCH			

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	

09 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 of the candidate

Name _____

APPLICATION FOR THE POST OF SPECIALIST (PART TIME/ FULL TIME) 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 _____)

(a) Age as on _____

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

05. Permanent address (In Block letters)

Telephone No: (Land Line) _____ Mobile No. - _____ PIN CODE: _____

06. Mailing address (In Block letters)

Telephone No: (Land Line) _____ Mobile No. - _____ PIN CODE: _____

E-mail ID _____

07. Category you belong to _____ category code

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

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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

Signature of the candidate

Place

Name _____

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 _____)

(a) Age as on _____

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: _____

Telephone No: (Land Line) _____ 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)

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 _____

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 _____)

(a) Age as on _____

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: _____

Telephone No: (Land Line) _____ 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)

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 _____

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 _____)

(a) Age as on _____

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: _____

Telephone No: (Land Line) _____ 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)

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 _____

**APPLICATION FOR THE POST OF HOMEOPATHY PHYSICIAN
ON CONTRACT BASIS FOR ONE YEAR.**

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 _____)

(a) Age _____

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

05. Permanent address (In Block letters)

Telephone No/ Mobile No.: _____ PIN CODE: _____

06. Mailing address (In Block letters)

Telephone No/ Mobile No: _____ PIN CODE: _____

E-mail ID _____

07. Category you belong to

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

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08. Educational Qualification:-

Sr. No.	Qualification	University/Board	% age of Marks obtained	No. of attempts.
1	B.H.M.S			

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	

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 of the candidate

Name _____