



कर्मचारी राज्य बीमा निगम
(श्रम एवं रोजगार मंत्रालय, भारत सरकार)
EMPLOYEES' STATE INSURANCE CORPORATION
(Ministry of Labour & Employment, Govt. of India)



निदेशालय (चिकित्सा) नोएडा / Directorate (Medical) Noida
क.रा.बी.नि. आदर्श अस्पताल, सेक्टर-24, नोएडा -201301
ESIC Model Hospital, Sector-24, Noida-201301
Phone-0120-2970320 Email: ms-noida@esic.nic.in

F. NO. -211-A-11(14)/2021/Interview-Med. -3878

Dated: 23/12/2021

WALK-IN INTERVIEW

“Walk-in interview” for recruitment for the post of Senior Resident purely on contract basis for a period of thirty-nine days is scheduled to be held on 28.12.2021 at ESIC Model Hospital, Sector-24, Noida.

Senior Resident on Contractual Basis For the Period of 39 Days		
S/No.	Description	Senior Resident (Contractual): For (39 Days)
1	No. of vacant posts in the concerned departments	<u>Department wise Posts</u> Medicine : 04 Surgery : 04 Peads : 02 ICU : 03 Orthopedics : 03 Casualty : 02
2	Eligibility	PG Degree/Diploma/DNB in concerned specialty from recognized university. Non-PG doctors having atleast 2 years working experience in the same discipline.
3	Age Limit	Not exceeding 45 years as on date of interview (Relaxation for SC/ST/OBC/PWD as per rules)
4	Emoluments	As per rule adopted by ESIC time to time.
5	Date & Time of Walk-In Interview	On 28.12.2021 at 10:00 AM onwards at ESIC (MH) Noida

Director (Medical) Noida

डॉ. बलराज शर्मा / Dr. Balraj Sharma
एम.बी.बी.एस. डी.ओ.ए. M.B.B.S, DCH
निदेशक (चिकित्सा) नोएडा / Director (Medical) Noida
क.रा.बी. निगम आदर्श अस्पताल, सेक्टर-24, नोएडा
ESIC Model Hospital, Sector-24, Noida

Note:-

1. The candidates should report in the office of Director (Medical) Noida, ESIC Model Hospital, Sec-24, Noida between 09:15 A.M to 10:15 A.M on the stipulated date with application form along with a set of documents as mentioned. Candidates reporting after 10:15 A.M will not be considered for walk-in-interview.
2. The number of posts may increase or decrease as per requirement, with the approval of, Director (Medical) Noida without any Notice.
3. No TA/DA will be paid to the candidates for appearing in the interview.
4. This advertisement has also been uploaded on website: www.esic.nic.in .
5. Director (Medical) Noida reserves the right to fill any or no posts or cancel the interview at any stage without assigning any reason thereof.
6. Reservation Rules will be applicable as per GOI Rules.
7. OBC candidates are required to submit latest caste/category certificate as per Central Govt. Performa (Issued not before 01/04/2021).
8. All above posts are for tenure (as mentioned) or contract basis or till new incumbent/regular Medical Officer joins.
9. **Candidate should take printout of application form, attached with this notification and bring the same duly filled along with all the documents (self-attested) in the same order as mentioned in it.**

APPLICATION FORM

(Please fill the particulars in Block Letters)

Latest
Passport Size
Photo

PARTICULARS OF THE CANDIDATES FOR THE POST: (SR/SRC/SPL).....
IN THE DEPARTMENT OF:- _____

Full Name	
Father's Name	
Spouse's Name (If Married)	
Sex	
Date of Birth & Age	
Mother Tongue	
Identification Mark	
Category	
Email ID	
Contact Number	
PAN Card Number	
Aadhar Number	
Nationality	
Educational Qualification (after intermediate)	
Other Qualification	
Employment Exchange Number (If Any)	
Correspondence Address	
Permanent Address	

Details of Previous Employment (in chronological order after graduation)			
Name & Address of the Employer	Period of Employment		Reason of Leaving
	From	To	

Have you ever been dismissed or otherwise punished during/after course of your employment/ studies, if YES so furnish details:

Number of Attempts in passing MBBS Examination: _____

1st Profession _____

2nd Profession _____

3rd Profession _____

Marks of final Examination _____

Self Attested Photocopy of Certificates

- Matriculation
- MBBS Degree with Mark sheets & Attempts
- PG Degree/ Diplomat DM/ MCH/ DNB(Super Speciality)
- Any Honor/ Medals
- Experience
- Paper Publication
- Any Other Experience
- UPMCI/ DMC Registration
- Aadhar No.

I, hereby certify that the above information and particulars submitted by me are correct and complete to the best of my knowledge and belief, in case any information or particulars furnished above are found incorrect/ false/ wrong, of any information being supported at any stage, I shall liable to any course of action as deemed fit.

Signature of the Candidate : _____
 Name of the Candidate : _____
 Date : _____