

INDIRA GANDHI E.S.I. HOSPITAL, Jhilmil, Delhi-110095. Employees' State Insurance Corporation

Ministry of Labour & Employment, Govt. of India Tele: 011- 22151329, Fax: 011- 22167518

Email: <u>ms-jhilmildelhi@esic.in</u>,

F.No.113-A/12/11/14/2021/Med

Date: 08/01/2021

Chinta Se Mukti

WALK IN INTERVIEW FOR REQUIREMENT OF SENIOR RESIDENT FOR 39 DAYS EXTENDABLE FOR ANOTHER 39 DAYS IN VARIOUS DEPARTMENT.

Walk in interview will be conducted on **15.01.2021** for recruitment (selection as well as empanelment) irrespective of category, for engagement of Senior Residents for 39 days and extendable for another 39 days, as per details given below: -

S. NO	Description	Senior Residents 39 days and extendable for another 39 days		
1	No. of Vacant Post	30 Post		
2	Department wise break-	Department	Vacancies	
	up of vacant post	ANESTHESIA	8	
	0	MEDICINE	4	
		GYANE	5	
		CHEST	1	
		SURGERY	3	
		RADIOLOGY	1	
		ENT	1	
		ORTHO.	2	
		EYE	1	
		PEADS.	4 .	
3	Minimum Qualification	 (a) MBBS with PG Degree/DNB/Diploma or equivalent as per residency scheme in concerned specialty from recognized University/Institution. (b) In the condition, if candidate having PG Degree/DNB/Diploma are not available, those without PG qualification but having 02 (Two) years' experience in concerned Specialty may be considered. 		
4	Age	As on date of interview: not exceeding 45 years. Age relaxation as per rules.		
5	Emoluments	Fixed pay of Rs. 1,01.000/- (Rupees One Lakh One Thousand only).		

INSTRUCTIONS

- Applicants having complete Bio-Data as per format uploaded on ESIC website along with duly affixed recent passport size photograph, one set of attested photocopies of testimonials (including MBBS & PG attempt certificate, 10th passing certificate as proof date of birth) and relevant documents including DMC registration certificate may report to the office of Medical Superintendent, IG ESI Hospital, Delhi on the date of walk-in-interview 15.01.2021 at 9.00 A.M The verification of documents will be done up to 10.30 a.m. with original certificate.
- 2. Candidates claiming reservation/age relaxation on ground of belonging to the OBC should submit the community certificate as prescribed by GOI, DOPT OM No. 36012/12/22/93-ESTT. (SCT) dated 08/09/93 which is modified by GOI DOPT OM No. 36033/3/2004(Res.) dated 09/03/2004 and time to time failing which the benefit of reservation/relaxation will not be given or their application shall be rejected. The OBC Certificate should be latest and not prior to one year form the date of interview.
- 3. The candidates must be registered with Delhi Medical Council before joining the post, if selected.
- 4. Candidates working in Govt. Service should produce NOC from their department at the time of interview.
- 5. Other terms and conditions shall be as per Govt. of India rules.
- 6. No TA/DA will be paid to the candidates for appearing in the interview.
- 7. The candidates will have to make their own arrangement of stay.
- 8. The candidates must bring original documents for verification at 9.00 AM Sharp on the date of interview.
- 9. The number of posts may increase or decrease as per requirement and approval of Medical Superintendent.

Sd **Dy. Medical Superintendent**

PASTE LATEST
SELF
ATTESTED
PHOTOGRAPH

7.0	
POST	
APPLIED	
SPECIALITY	

<u>APPLICATION FOR THE POST OF SENIOR RESIDENT FOR 39 DAYS EXTENDABLE FOR ANOTHER 39 DAYS:</u>

S.NO.	PARTICULARS	DETAILS		
1.	Name in block letters			
<u>2.</u>	Father's/Husband Name			
<u>3.</u>	Date of birth			
4.	Age as on date of interview			
5.	Are you citizen of India by birth and or domicile			
6.	Permanent Address			
7.	Present Residential address			
8.	Contact number & E Mail address			
9.	Gender: Male/Female			
10	Whether SC/ST/OBC/UR			
11.	Identification mark			
12.	Aadhar No.			
<u>13.</u>	Whether married/unmarried			
<u>14.</u>	Education Qualification with year of passing			
<u>15.</u>	DMC Registration No.			
<u>16.</u>	Experience (if any) Govt./Pvt. Hospital/Institution (in years/month)			
<u>17.</u>	<u>List of enclosures</u>			

DECLARATION:

I undertake that all the information given above by me is correct to the best of my knowledge and I solemnly affirm that if any information given by me found wrong at any stage, my candidature for the post will automatically stand cancelled.

Date:

(Name & Signature of Candidate)

TO BE FILLED BY OFFICE ONLY

S.NO.	DETAIL OF DOCUMENTS	ENCLOSED (Y/N)	REMARKS
1.	DATE OF BIRTH CERTIFICATE		
2	MBBS DEGREE	*	
3	MD DEGREE/DIPLOMA		
4	DMC REGISTRATION		
5	EXPERIENCE CERTIFICATE		
6	CASTE CERTIFICATE (SC/ST/OBC)	4	
7	PH CERTIFICATE (IF APPLICABLE)		
8	ANY OTHER INFORMATION		

Checked by:

Check list of enclosure:

- 1. <u>Date of Birth Certificate (10th passing Certificate)</u>
- 2. <u>Degree Certificate along with attempt certificate (MBBS)</u>
- Diploma/PG Certificate along with attempt certificate, if applicable
 Experience Certificate, if applicable
 Caste (SC/ST/OBC/PH) Certificate(latest), if applicable
 Residential address proof.