

 <p>क.रा.बी.नि. E.S.I.C.</p>	<p>कर्मचारी राज्य बीमा निगम (श्रम एवं रोजगार मंत्रालय, भारत सरकार) EMPLOYEES' STATE INSURANCE CORPORATION (Ministry of Labour & Employment, Govt. of India)</p>	 <p>सत्यमेव जयते</p>	<p>क.रा.बी.नि. चिकित्सा महाविद्यालय एवं अस्पताल ESIC Medical College & Hospital देसूला, एमआईए, अलवर (राज.)- 301030 Desula, MIA, Alwar (Raj) - 301030 E-mail:-dean-alwar.rj@esic.nic.in ms-alwar.rj@esic.nic.in Website:- www.esic.nic.in/www.esic.in</p>
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**ADVERTISEMENT FOR RECRUITMENT OF 15 POST FOR JUNIOR RESIDENT
(FOR 44 DAYS) FOR ESIC MEDICAL COLLEGE & HOSPITAL, ALWAR
(RAJASTHAN)**

Advertisement No. 04/2022

Date:- 25 /04/2022

Date of Interview:- 05.05.2022

Mode of Interview:-OFFLINE

VENUE FOR INTERVIEW

ACADEMIC BLOCK, ESIC MCH, ALWAR, RAJASTHAN - 301030

1. All seats will be filled up for 44 days.
2. Interested candidates should report for document verification from **09.00 AM** on wards in **ACADEMIC BLOCK, ESIC MCH, ALWAR, RAJASTHAN – 301030**, followed by interviews on the same day from **11.00 AM**.
3. Detailed advertisement & application form can be downloaded from website **www.esic.nic.in**

Eligibility Criteria:-

AGE:-

1. Not exceeding 30 years as on the date of interview

QUALIFICATION:-

1. MBBS from recognized University.
2. Internship should also be completed as on the date of Interview.
3. Candidate should be registered with NMC/MCI/State Medical Council.

EMOLUMENTS:-

1. Consolidated Remuneration of Rs. 96,268/- Per month. (As per ESIC Hqrs. Letter No. Z-17/11/1/2007/Med. IV (Pt. File) dated 13.04.2022. In addition JRs will be entitled for transport allowance with DA on transport allowances. DA on TA will be revised from time to time as per rules.

How to apply:-

1. The eligible and desirous candidates, along with their application filled properly in prescribed Proforma "Annexure-A" should appear for walk-in-interview on the mentioned date the time.
2. The application form is also being uploaded on www.esic.nic.in
3. The candidate should bring two recent passport size photograph along with one set of attested photocopies and original of testimonials.

Terms & Condition:-

1. Vacancies are likely to change at the time of Interview.
2. No TA/DA will be paid to the candidates for appearing in the interview.
3. The Dean/Medical Superintendent reserves the right to fill up all or not to fill up any vacancy.
4. The Dean/ Medical Superintendent reserve the right to alter the date or cancel the interview.
5. Selected candidate will have the deposit security deposit of Rs. 10,000/- in State Bank of India ESI Fund Account No. 1 Payable at MIA, Alwar.
6. Private practice of any kind will not be allowed.
7. Hostel Accommodation/Quarter may be provided.
8. The candidates may ascertain their eligibility and report for interview on the scheduled date and time for interview.
9. The verification of documents will be done upto **10.30 AM** with original certificates.
10. The interviews shall be conducted at **ACADEMIC BLOCK, ESIC MCH, ALWAR, RAJASTHAN - 301030**
11. **The Dean reserves the right to cancel/postpone the recruitment process at any stage at his/her discretion such decision will be binding on all concerned.**
12. Other terms and condition will be applicable as issued by competent authority from time to time.

Handwritten signature and text:
28/04/2022
For Dean,
ESIC Medical
College,
Alwar.

Selection Procedure

1. Selection will be made on the basis of performance of candidate in interview.
2. Result will be communicated through e-mail and will be displayed on website.
3. Selected candidates will have to join immediately after receipt of offer of appointment.

Note:- Candidates may contact **DEAN OFFICE, ESIC MEDICAL COLLEGE & HOSPITAL, ALWAR, RAJASTHAN** on phone number **8375834279** between **11.00 AM to 4.00 PM** on working days for any clarification. They may also send their queries, if any, on E-Mail: **dean-alwar.rj@esic.nic.in**

Advt. No: 04/2022

Dated: 25/04/2022

[Handwritten Signature]
for **Dean**

**ESIC Medical College &
Hospital, Alwar, Rajasthan**

ANNEXURE-A

Application for the Post of Senior Resident/ Junior Resident

ESIC Medical College & Hospital, MIA, Desula, Alwar

Post for which applying:.....

1.Name(in Block letters)-----

2.Father's/ Husband's Name:-----

3.Permanent Address :-----

4.correspondence Address:-----

Email: -----

5.Telephone/mobile no.:-----

6.Date of birth :-----

7.Age as on date of Interview:-----Years-----Month-----Days.

8.Whether SC/ST/OBC/General/PH/EWS :-----

9.Educational/Professional Qualification:-

<u>DEGREE/DEPLOMA/PG DEGREE</u>	<u>YEAR OF PASSING</u>	<u>UNIVERSITY</u>	<u>NO. OF ATTEMPTS</u>	<u>REMARKS</u>
MBBS				
PG Diploma ()				
PG Degree ()				
DNB ()				
ANY Others				

10.Work Experince

<u>Sr.No.</u>	<u>Post Held</u>	<u>Institution</u>	<u>Period (Dates:from-to)</u>	<u>Period in months/year</u>

Recent passport
Size Photo Self
Attested

11. Whether worked/working as Senior Resident/Junior Resident in any Central/State Govt. :- Yes/No

If any : 1.Period of SR/JR ship from-----to-----

2.Name of organization & Address-----

12. Registration No. (State/MCI) : -----

13. Aadhar No. : -----

14. Have you ever been dismissed or punished by any Govt/ State Authorities so provide details:

Declaration:-I do hereby declare that all the statements made in this application are true complete and correct to the best knowledge and belief. I am fully aware that in the event of any particular 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 reseated/cancelled and in the event of any statements information found false incorrect even after my appointment my services are liable to be terminated without any notice. I am citizen of India by birth/domicile.

Date :

Place:-

(Signature of Candidate)

Check list of enclosures

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|---|--------|
| 1.Date of Birth Certificate in original with a copy | Yes/No |
| 2.U.G. & P.G. Degree certificates along with mark sheet & attempt certificate in original with a copy | Yes/No |
| 3.Experience Certificate,if applicable in original with a copy | Yes/No |
| 4.MCI/State Medical Council Registration Certificate in original with a copy | Yes/No |
| 5.Caste (SC/ST/OBC/PWD) Certificate if applicable in original with a copy | Yes/No |

(Signature of Candidate)

