



E.S.I.C. MODEL HOSPITAL

(MINISTRY OF LABOUR AND EMPLOYMENT, GOVT. OF INDIA)

कर्मचारी राज्य बीमा निगम आदर्श हस्पताल

(श्रम एवं रोजगार मंत्रालय, भारत सरकार)

BHARAT NAGAR, LUDHIANA- 141001, भारत नगर, लुधियाना-141001

(ISO 9001: 2008 QMS CERTIFIED)/आई एस ओ 9001:2015 प्रमाणित

E-mail: ms-ludhiana@esic.nic.in ; Website: <http://www.esichospitals.gov.in>

☎:- 0161-2403393

ESIC
Chinta Se Mukti

(Med. Admin. Br.)

No. 122-A-12/13/3/04-MHL

Dated: 16.03.2020

WALK-IN-INTERVIEW ON DT. 25.03.2020 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 | 1 | 4 | OL |
| 2 | Gen. Medicine | 2 | - | 1 | - | 3 | OL |
| 3 | Gen. Surgery | 1 | 1 | 2 | 1 | 5 | ND |
| 4 | ICU | - | - | 1 | - | 1 | - |
| 5 | Obs. & Gynae | 1 | 1 | 2 | 1 | 5 | ND |
| 6 | Orthopaedics | - | - | 1 | 1 | 2 | ND |
| 7 | Paediatrics | - | 1 | 1 | - | 2 | OL |
| 8 | Pathology | - | - | 1 | - | 1 | OL, OA |
| 9 | Radiology | 1 | - | - | - | 1 | OL |
| 10 | Urology | - | 1 | - | - | 1 | ND |

(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 candidate may be considered for walk-in-interview irrespective of category, for engaging Senior Residents for 39 days extendable by another 39 days subject to fulfillment of Essential Qualifications and other conditions.

Note:- For No. 2 & 3 - One post is reserved for Person with Disability as per Centre Govt. Rules & remaining are for all eligible candidates.

2. 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 |

* For 1 year or till the regular incumbent joins whichever is earlier.

Note:- Reservation as per Central Govt. rules.



E.S.I.C. MODEL HOSPITAL

(MINISTRY OF LABOUR AND EMPLOYMENT, GOVT. OF INDIA)

कर्मचारी राज्य बीमा निगम आदर्श हस्पताल

(श्रम एवं रोजगार मंत्रालय, भारत सरकार)

BHARAT NAGAR, LUDHIANA- 141001, भारत नगर, लुधियाना-141001

(ISO 9001: 2008 QMS CERTIFIED)/आई एस ओ 9001:2015 प्रमाणित

E-mail: ms-ludhiana@esic.nic.in ; Website: <http://www.esichospitals.gov.in>

☎:- 0161-2403393

ESIC
Chinta Se Mukti

(Med. Admin. Br.)

3. 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 & STD | - | - | 1 | - | 1 | OL |
| 4 | Gen. Surgery | - | 1 | - | - | 1 | ND |
| 5 | Microbiology | 1 | - | - | - | 1 | OL, OA |
| 6 | Orthopaedics | - | - | 1 | - | 1 | ND |
| 7 | Pediatrics | - | 1 | - | - | 1 | OL |
| 8 | Pathology | - | - | 1 | - | 1 | OL, OA |
| 9 | Radiology | 1 | - | 1 | - | 2 | OL |

(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.

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

* For 1 year or till the regular incumbent joins whichever is earlier.

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.



E.S.I.C. MODEL HOSPITAL

(MINISTRY OF LABOUR AND EMPLOYMENT, GOVT. OF INDIA)

कर्मचारी राज्य बीमा निगम आदर्श हस्पताल

(श्रम एवं रोजगार मंत्रालय, भारत सरकार)

BHARAT NAGAR, LUDHIANA- 141001, भारत नगर, लुधियाना-141001

(ISO 9001: 2008 QMS CERTIFIED)/आई एस ओ 9001:2015 प्रमाणित

E-mail: ms-ludhiana@esic.nic.in ; Website: <http://www.esichospitals.gov.in>

☎:- 0161-2403393

ESIC
Chinta Se Mukti

(Med. Admin. Br.)

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*. (Eligibility for Biochemistry:- 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. | 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 |
| Age as on the date of interview | 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. |
| Emoluments | Pay and Allowances as per rules and ESIC Headquarters office orders from time to time. | | | |
| *** 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 along with 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.
- Applicants are advised to report to the office of Medical Superintendent, ESIC Model Hospital, Bharat Nagar, Ludhiana on **26.03.2020** accordingly for interview as mentioned above upto **09:30 AM** and candidates who will report after prescribed time are liable for rejection.
- No TA/DA will be paid to the candidates for appearing in the interview.**



E.S.I.C. MODEL HOSPITAL
(MINISTRY OF LABOUR AND EMPLOYMENT, GOVT. OF INDIA)
कर्मचारी राज्य बीमा निगम आदर्श हस्पताल
(श्रम एवं रोजगार मंत्रालय, भारत सरकार)

BHARAT NAGAR, LUDHIANA- 141001, भारत नगर, लुधियाना-141001
(ISO 9001: 2008 QMS CERTIFIED)/आई एस ओ 9001:2015 प्रमाणित
E-mail: ms-ludhiana@esic.nic.in ; Website: <http://www.esichospitals.gov.in>
☎:- 0161-2403393

ESIC
Chinta Se Mukti
(Med. Admin. Br.)

Note:-

- All candidates must fulfill the essential qualifications as on date of interview.
- The Appointing Authority reserves the rights to change the date of interview and/or cancel the offer/advertisement without assigning any reason thereof.
- 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.
- Medical Superintendent, ESIC MH Ludhiana reserves the right to fill any or no posts or cancel the interview at time.

NOTE: Kindly note that w.e.f May, 2020, Interview for the recruitment of contractual doctors at ESIC Model Hospital Ludhiana will be held on 1st Thursday of Every Month till further orders. Any Eligible candidates willing to apply can report on the respective day with all the documents in original. The vacancy position for the respective month will be uploaded on <https://www.esic.nic.in/recruitments> and <http://www.esichospitals.gov.in> on 3 days prior to the interview. The essential qualification criteria will remain same as mentioned above. If the 1st Thursday is a Gazetted Holiday, then the interview will be held on the next working day.

Sd/-
MEDICAL SUPERINTENDENT



E.S.I.C. MODEL HOSPITAL

(MINISTRY OF LABOUR AND EMPLOYMENT, GOVT. OF INDIA)

कर्मचारी राज्य बीमा निगम आदर्श हस्पताल

(श्रम एवं रोजगार मंत्रालय, भारत सरकार)

BHARAT NAGAR, LUDHIANA- 141001, भारत नगर, लुधियाना-141001

(ISO 9001: 2008 QMS CERTIFIED)/आई एस ओ 9001:2015 प्रमाणित

E-mail: ms-ludhiana@esic.nic.in ; Website: <http://www.esichospitals.gov.in>

☎:- 0161-2403393

ESIC
Chinta Se Mukti

(Med. Admin. Br.)

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 _____)

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

05. Permanent address (In Block letters)

_____ PIN CODE: _____

06. Mailing address (In Block letters)

_____ PIN CODE: _____

Mobile No. - _____ E-mail ID _____

07. Category you belong to:

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 | 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. _____ 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 _____



E.S.I.C. MODEL HOSPITAL
(MINISTRY OF LABOUR AND EMPLOYMENT, GOVT. OF INDIA)

कर्मचारी राज्य बीमा निगम आदर्श हस्पताल

(श्रम एवं रोजगार मंत्रालय, भारत सरकार)

BHARAT NAGAR, LUDHIANA- 141001, भारत नगर, लुधियाना-141001

(ISO 9001: 2008 QMS CERTIFIED)/आई एस ओ 9001:2015 प्रमाणित

E-mail: ms-ludhiana@esic.nic.in ; Website: <http://www.esichospitals.gov.in>

☎:- 0161-2403393

ESIC
Chinta Se Mukti

(Med. Admin. Br.)

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 _____)

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

05. Permanent address (In Block letters)

_____ PIN CODE: _____

06. Mailing address (In Block letters)

_____ PIN CODE: _____

Mobile No. - _____ E-mail ID _____

07. Category you belong to

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 | | | |
| 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 of the candidate

Name: _____



E.S.I.C. MODEL HOSPITAL
(MINISTRY OF LABOUR AND EMPLOYMENT, GOVT. OF INDIA)
कर्मचारी राज्य बीमा निगम आदर्श हस्पताल
(श्रम एवं रोजगार मंत्रालय, भारत सरकार)

BHARAT NAGAR, LUDHIANA- 141001, भारत नगर, लुधियाना-141001
(ISO 9001: 2008 QMS CERTIFIED)/आई एस ओ 9001:2015 प्रमाणित
E-mail: ms-ludhiana@esic.nic.in ; Website: <http://www.esichospitals.gov.in>
☎:- 0161-2403393

ESIC
Chinta Se Mukti
(Med. Admin. Br.)

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

01. Name in full (in Block Letters): _____
02. Father's/Husband's Name: _____
03. Date of Birth (In Christian Era: (In figures) _____
(In words _____)
04. Are you a citizen of India by birth and / or domicile: _____
05. Permanent address (In Block letters)

PIN CODE: _____
06. Mailing address (In Block letters)

PIN CODE: _____
Mobile No. - _____ E-mail ID _____

Paste your recent
passport size

07. Category you belong to

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 | 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 | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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 of the candidate

Name _____