

EMPLOYEES' STATE INSURANCE CORPORATION MEDICAL COLLEGE, KALABÜRAGI

[Ministry of Labour and Employment, Govt. of India] SEDAM ROAD, KALABURAGI-585106.

Email Id : <u>deanmc-gb.kar@esic.nic.in</u>

Fax No.: 08472-265545

Date: 05.11.2019

No.532/GLBMC/A/12/12/PT. Specialists/2019

Tel. No.: 08472-265546/47/48

Walk-in interview for Engagement of Part Time Specialist on contractual basis at ESIC MEDICAL COLLEGE AND HOSPITAL, KALABURAGI.

Employees' State Insurance Corporation is a statutory body constituted under an Act 1948). A Walk-in-Interview will be held for engagement / appointment of Part Time Specialist on contract basis in ESIC Medical College & Hospital Kalaburagi.

Post : Part Time Specialist

SI. No.	Specialty	No. of Post	Age not exceeding as on date of Interview
1.	Radio-diagnosis	01	64 Years

Educational Qualification: -

- 1. MBBS from a recognized Medical Council.
- 2. A Post Graduate Degree in concerned specialty from MCI recognized medical college/DNB in the concerned specialty or equivalent.
- 3. Should be registered with MCI.
- 4. Retired Specialist are also eligible to apply.
- 1. EMOLUMENTS AND TERMS & CONDITIONS:
 - a) **Rs. 60,000/-** (consolidated) per month for 04 hours per day & 04 days in a week from 10:00 AM to 02:00 PM (Monday to Thursday).
 - b) **Rs. 12,000/-** per month on giving undertaking to be available for emergency call duty before/after the schedule timings.
- c) In addition to above, no other allowances like D.A, N.P.A, HRA etc. would be payable.

2. TERMS OF CONTRACT

a) Selected candidates shall be appointed on purely contractual basis for the maximum period of one year or till regular incumbent joins (whichever is earlier).
b) The Contractual engagement may be terminated / discontinued on either side giving one-month prior notice to this effect without assigning any reason.

c) Other terms and condition will be applicable as issued by competent authority from time to time.

d) This being 01-year contract, absence for period beyond 15 days will be treated as abandonment of duty and the contract will be terminated without any reason

e) Selected candidates will have no claim for regularization of services in ESIC Hospital/Medical Institution.

f) The appointment is subject to Medical Fitness.

g) No TA/DA will be admissible for attending the interview/joining the post.

h) Part Time specialist selected will be required to submit acceptance/consent letter in writing before appearing for medical examination.

i) The doctors at any time found guilty of any gross misconduct or negligence of his/her duties shall be terminated without any notice or payment in lieu of notice period.

j) Selected candidates will join duty immediately or the date indicated in the offer of appointment/engagement likely to be issued, failing which the offer will be treated as canceled.

k) Part Time Specialist has to wear his/her own white coat with name badge during the duty hours.

1) Candidates are requested to bring their original certificates in evidence of age proof (Date of Birth) educational qualification, Medical Council registration of the State/MCI, experience certificates along with one set of self-attested Xerox copies with 02 passport size recent colour photographs for appearing in the walk-in-interview without fail.

m) Outstation candidates may book their tickets for the outward journey late in the evening.

"No photocopies will be arranged/ provided by the office under any circumstances"

4.SELECTION PROCEDURE:

a.) Selection will be made on basis of interview of candidates which will be conducted by the duly constituted selection board.

b.) All eligible candidates should apply in the application format available at the registration counter (College building) on 12.11.2019.

c.) Selected candidates will have to join immediately after receipt of offer of Appointment.

d.) The final selection will be based purely on performance in the personal interview.

How to apply:

The eligible candidates, along with their application filled properly in prescribed proforma should appear for a walk-in-interview on the appointed date & time. They should also bring two recent passport size photographs along with one set of attested photocopies and originals of testimonials.

a) Sciected candidates shall be appointed on purely contractual b

manumbers of one year or the regular meanment joins (whenever

IMPORTANT DATES AND TIMINGS

SI NO	EVENT	DATE	TIME	
lli 1 eve	Registration time	12.11.2019	09:00AM to 10:00AM	
2	WALK-IN INTERVIEW		10:30 AM	

SSAULT TEORDAL IN SITERS IN INCONCIT LITUESS

) No TA/DA will be admissible for attending the interview/joining the p



EMPLOYEES' STATE INSURANCE CORPORATION MEDICAL COLLEGE, KALABURAGI

[Ministry of Labour and Employment, Govt. of India]

SEDAM ROAD, KALABURAGI-585106.

 Tel. No.: 08472-265546/47/48
 Email Id : deanmc-gb.kar@esic.nic.in
 Fax No.: 0

Fax No.: 08472-265545

APPLICATION FORM FOR THE POST OF PART TIME SPECIALIST

1. NAME (in cap	ital letters)				Name of the o
2. Father's/Husb	and Name	lo enu		(a) notitio9 F	Affix attested Recent passport
3. Date of Birth (i (in words		8 é <u>riob</u>		held and to whom reporting	Size photo
4. (a) Religion		e totality	. No. 64		Autonomous
(b) Nationality					ignature of the Candidate
5. Mailing Addres	SS				
(With e-mail add And telephone n 6. Permanent Ad (With telephor	umber dress				
7.Sex (write 01 for	or Male, 02	for Femal	e)	edit lis tedt all the	I he <u>reby de</u>
8.(i) (a) If physica	ally handica	pped		Yes/No	
(Orthopedically h	andicapped	ation io (b			
(b) Percent	age of Disa				stage, my cendid
(ii)Whether Ex-	servicemar	pient nei		Yes/No	
09. Communit (Write 01 for So 10. Essential ec Annexure if	C, 02 for Ol ducational C	3C ,03 for Qualificatio		applied for/tak	this post has been
Name &	& Duration		Degree /	Subjects	
University Address of College	From	То	Examination Passed	alterative en ensi V Sind almaerik	Marks obtained
				es helanalen se Transferen	
			e to the first frame		

11. Date of Completion of compulsory Rotating Internship

- 12 Date of Registration with MCI / SMC ____
- 13 Details of Employment in Chronological order (Attach Annexure if Necessary)

EMPLOYPES' GTATE INSURANCE CORPORATION

Name of the Organization (please Spécify whether Central Govt./State Govt./Public Sector /Autonomous body/private sector	Position (s) held and to whom reporting	Period of Service	Nature of Work done & reasons for Leaving	Scale of Pay	Basic pay
Candidate	malegoria	uural .			
		and balance of	ones a sub-	1995 F. 1995	DOW BLUEW 10
		<u>.</u>		ldress) (n. M.	e lism-e rhiW)-
Lui deles	ah sandile ni		<u>er mill term</u> etar	Address: whe	6. Permanent

I hereby declare that all the statement made in this application are true, complete and correct to the best of my knowledge and belief.

I understand that in the event of any information found false or incorrect at any stage, my candidature / appointment shall be Liable to be cancelled / terminated summarily without notice or any compensation in Lieu thereof.

I also affirm that "No objection certificate" from the present employer for applying this post has been applied for/taken.

	Signat	Signature of candidate		