APPLICATION FORM FOR THE ENGAGEMENT OF...
ON CONTRACT BASIS,<u>ESIC MODEL HOSPITAL KATHA, BADDI, DIST SOLAN- H.P</u>.

(<u>Please fill in capital letters only</u>)
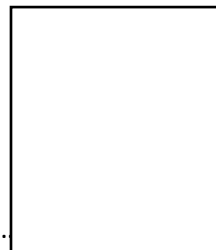
1. Post Applied for: -...

2. Name in full (IN BLOCK LETTER) ....

3. Father`s/Husband `s Name...

4. Date of Birth (in figures) .... (In Words) ....

5. Age as on the date of interview Years............. Months.................. Days................................

6. Religion...

7. Category: GEN ☐   SC ☐   ST ☐   OBC ☐   EWS ☐

8. Nationality...

9. Mailing address (with e mail address and telephone number)
....
....

10. Permanent address (with e mail address and telephone number)
....
....
....

11. Sex: Male/Female

12. Weather ESIC/Govt. Employees: Yes/No

13. UID (Aadhar) No ....

14. Date of completion of compulsory rotating internship...

15. Medical Council Registration No...

16. Name of the Medical Council..

17. Tentative date of joining (if selected) ....

18. Weather exempted from Fee: Yes/No.

If no: DDNo............... Dated..............Bank name...

19. Education Qualification:

S. No	Name of the Exam	University	Attempts	% of marks	Year of passing

20. Experience: -

S.No	Name of Hospital	Post Held	Period		
			From	to	Total period (Years & Months)

21. Presently working:

a Name of the institution………………………………………………………………Govt./Pvt.

b Designation…………………………………………………………………………………

22. NOC from present employer taken/PPO copy available (if applicable)

23. List of enclosure: -

S.No	Particulars	Enclosed Yes/No
1	Matriculation certificate as proof of date of birth	
2	Education qualification PG Degree/diploma/BHMS/BDS Degree	
3	Application fees of (if applicable)	
4	Experience certificates	
5	MCI Registration	
6	Caste Certificate (SC/ST/OBC & non-creamy layer cert/EWS	
7	UID (Aadhar No)	
8	Cancelled cheque	

Declaration

I hereby declare that all the statements 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 being 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. If selected, I am willing to serve anywhere in India.

Place …………………
Date…………….   Signature of candidate