## **ANNEXURE-I**

## APPLICATION FORM FOR ENGAGEMENT OF SPECIALIST/SUPERSPECIALIST ON CONTRACTUAL BASIS IN ESIC HOSPITAL & ODC (EZ), JOKA

1.		(a) Pos	Attach Recent Passport Size Photograph – self					
		(b) Spe	ecialty applied for :		attested across the lower part of the			
2.		Name		photograph				
3.								
4.		(a) Dat						
		(in wo						
5.		(a) Rel	•	b) Nationality:				
6.		Mailing Address:						
7.	(a) E-Mail:(b) Mobile No.							
8.	Per	manent	Address:					
	9.	Sex (w	rite 1 for Male, 2 for Female, 3 for Transo	gender) :				
10.		(i)	Whether Ex-Serviceman	: Yes / No				
		(ii)	Whether ESIC/ Govt. Employee	: Yes / No				
11.	Community t		unity to which applicant belongs	:				
		Write	1 for SC					
			2 for ST					
			3 for OBC					
			4 for General					

12. ESSENTIAL EDUCATIONAL AND PROFESSIONAL QUALIFICATIONS (Graduate level onwards) (Attach annexure, if necessary)

Name & Address of	University	Duration		Degree/Examination	Subjects	Percentage
College		From	То	Passed	1	of marks obtained

13. DETAILS OF EMPLOYMENT IN (CHRONOLOGICAL ORDER): Work experience certificate to be furnished. (Add extra rows if necessary)

Name of the Institute	Position (s) held	Period of service		Institution	Whether Experience recognized
mstitute		From	То	Type (Govt. /	Experience recognized
				Pvt.)	by MCI

1.		2.			
3.		4.			
5.		6.			
7.		8.			
9.		10.			
11.		12.			
13.		14.			
15.		16.			
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.  I also confirm that No Objection from the Present Employer for applying this post has been applied for /taken.					
Place:					
Date:		Signature of the Candidate			

14. List of Enclosures: