

कर्मचारी राज्य बीमा निगम अस्पताल  
EMPLOYEES' STATE INSURANCE CORPORATION MODEL HOSPITAL



राजाजीनगर, बंगलूर ५६००१०  
RAJAJINAGAR, BANGALORE-560 010  
(भारत सरकार का श्रम एवं रोजगार मंत्रालय)  
(Ministry of Labour & Employment, Govt. of India)  
फ़ोन/Phone 080-23325130/23320271 फ़ैक्स/Fax : 080-23325130

No:532/U/19/14/2015-16.Estt

Date: 29-05-2018

**WALK IN INTERVIEW FOR THE POST OF HOMEOPATHY PHYSICIAN AND  
HOMEOPATHY PHARMACIST ON PART TIME BASIS (CONTRACT) AT ESIC-MC, PGIMSR  
AND MODEL HOSPITAL, RAJAJINAGAR, BANGALORE**

Walk in interview for the post of Homeopathy Physician and Homeopathy Pharmacist on Part Time basis (contract) **will be held on 26-06-2018** at ESIC-MC, PGIMSR and Model Hospital, Rajajinagar, Bangalore-560010.

SLNo.	Post	No. Of posts	Eligibility and Remuneration
1	Homeopathy Physician	1	<b>Education Qualification:</b> BHMS <b>Experience:</b> 03 years <b>Age:</b> not exceeding 64 years as on 26-06-2018 (Relaxation as per rule for SC/ST/OBC) <b>Emoluments:</b> Rs. 50,000 per month ( 5 hrs for 6 days per week)
2	Homeopathy Pharmacist	1	<b>Education Qualification:</b> Diploma in Homeopathic Pharmacist from a recognized State Board. <b>Experience:</b> 03 years experience in Homeopathic Pharmacy in recognized Institution and Registered under Pharmacy Act 1948 with the competent Pharmacy Council. <b>Age:</b> not exceeding 32 years as on 26-06-2018 (Relaxation as per rule for SC/ST/OBC) <b>Emoluments:</b> Rs. 11,360 per month ( 5 hrs for 6 days per week)

**Date of the Interview : 26-06-2018**

**Registration Time:** 09.00 AM to 10.30 AM

**Interview Timings :** 10.00 A.M

.....2:.....

**Venue of the Interview:** 6<sup>th</sup> Floor, Dean's Office,  
ESIC-MC, PGIMSR and Model Hospital,  
Rajajinagar,  
Bangalore-560 010.

**Documents to be submitted:**

1. Application form complete in all respects.
2. Two Passport size Photographs.
3. Two sets of Self attested copies of the following along with the originals for verification:
  - a) Proof of Date of Birth.
  - b) Proof of Identity.
  - c) SSC / 10<sup>th</sup> Standard Certificate or equivalent.
  - d) Certificates of qualifications.
  - e) Registration with the concerned Medical Council / Pharmacy Council and State Government Registration.
  - f) Caste Certificate.
  - g) Experience Certificate.

**Terms and Conditions:**

1. Appointment shall be for maximum duration of one year. The contract will be valid either up to the date when regular staff joins duty or one year from the date of appointment whichever is earlier.
2. Reservation will be done as per the rule.
3. The Recruitment is purely on contractual basis.
4. No interim correspondence / enquiry will be entertained.
5. No TA shall be payable to any candidate for appearing in the Interview.
6. Contractual engagee will be allowed to avail leave which will be computed at pro-rata basis of one day for each completed month of service. Remuneration will be deducted at pro-rata basis for absence beyond this limit.
7. No other benefit / facility will be claimed by the contractual engagee & that same will not be granted to them either.
8. Candidates must have requisite experience in the field of specialties.
9. The Dean, ESIC-MC & PGIMSR, Rajajinagar reserves the right to fill up all or not to fill up any vacancy.
10. The Dean, ESIC-MC & PGIMSR, Rajajinagar reserves the right to alter the date or cancel the Interview.

**Sd/-**  
**DEAN**  
**ESIC-MC, PGIMSR AND MODEL HOSPITAL,**  
**RAJAJINAGAR, BANGALORE**

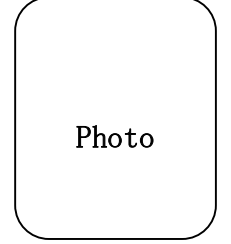
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**APPLICATION FOR THE POST .....**

- 1 Name of the Candidate : \_\_\_\_\_
- 2 Father's/Husband's Name : \_\_\_\_\_
- 3 Mother's Name : \_\_\_\_\_
- 4 Date of Birth as per SSLC Certificate : \_\_\_\_\_
- 5 Religion : \_\_\_\_\_
- 6 Nationality : \_\_\_\_\_
- 7 Category (SC/ST/OBC/UR) : \_\_\_\_\_
- 8 Whether PH : YES/NO
- 9 Mobile Number : \_\_\_\_\_
- 10 E-mail ID : \_\_\_\_\_
- 11 Address (Permanent) : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 12 Address for correspondence : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



13 Educational Qualification:

Sl No.	Name of the Exam	University	Percentage of Marks	Year of Passing

14 Pharmacy Council Registration No. :

15 Name of the Pharmacy Council :

16 Experience

Sl. No.	Name of the Institution and Designation held	From	To	Period

17 Presently working as

a) Designation \_\_\_\_\_

b) Name of the Institution \_\_\_\_\_

c) Govt./ Private \_\_\_\_\_

18 NOC certificate from present employer taken if employed in Government Institution.

19 Tentative date of joining (If selected) :

I hereby declare that the information given above is true and correct to the best of my knowledge and belief. In case any information found false/ incorrect at a later date of the recruitment/ appointment, I shall be bound by the decision of Dean, ESIC, PGIMSR & Model Hospital, Rajajinagar, Bangalore – 10/ ESI Corporation.

**Encl: Pertaining to Sl No.13 to 18.**

Date & Place : \_\_\_\_\_/ \_\_\_\_\_

(Signature of Candidate)