

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

1. (a) Post applied for :
 - (b) Specialty applied for :
 2. Name in full (**in block letter**):
 3. Father's/ Husband's Name:
 4. (a) Date of Birth (**in figures**):
 - (b) **(in words)** :
 5. (a) Religion : (b) Nationality:.....
 6. Mailing Address:.....
.....
.....
 7. (a) E-Mail : (b) Mobile No.....
 8. Permanent Address :
 -
 9. Sex (write 1 for Male, 2 for Female, 3 for Transgender) :
 10. (i) Whether Ex-Serviceman : Yes / No
 - (ii) Whether ESIC/ Govt. Employee : Yes / No
 11. Community to which applicant belongs :
- Write 1 for SC
2 for ST
3 for OBC
4 for General

Attach Recent Passport Size Photograph – self attested across the lower part of the photograph

(4 cm x 3 cm)

14. List of Enclosures:

- | | |
|-----|-----|
| 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