
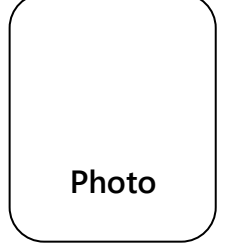
 <p>क.स.बी.नि. ESIC</p>	<p>ಕಾರ್ಮಿಕರ ರಾಜ್ಯ ವಿಮಾ ನಿಗಮ (ಕಾರ್ಮಿಕ ಮತ್ತು ಉದ್ಯೋಗ ಸಚಿವಾಲಯ, ಭಾರತ ಸರ್ಕಾರ) ಕರ್ಮಚಾರಿ ರಾಜ್ಯ ಬಿಮಾ ನಿಗಮ (ಶ್ರಮ एवं रोजगार मंत्रालय, भारत सरकार) EMPLOYEES' STATE INSURANCE CORPORATION (Ministry of Labour &amp; Employment, Govt of India)</p>	 <p>सत्यमेव जयते</p>	<p>ಇ.ಎಸ್.ಐ.ಸಿ ಎಂ.ಸಿ ಪಿ.ಜಿ.ಐ.ಎಂ.ಎಸ್.ಆರ್ ಮತ್ತು ಮಾದರಿ ಆಸ್ಪತ್ರೆ, ರಾಜಾಜಿನಗರ, ಬೆಂಗಳೂರು-560010 ई.एस.आई.सी आदर्श अस्पताल राजाजीनगर बेंगलुरु-560010 ESIC MC, PGIMS &amp; MH, RAJAJINAGAR, BENGALURU-560010. Email: <a href="mailto:esipgi.rajblr@gmail.com">esipgi.rajblr@gmail.com</a>, Website: <a href="http://www.esic.gov.in">www.esic.gov.in</a>. Ph.No.080-23325130/23320271, Fax: 080-23325130</p>
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**APPLICATION FOR THE POST OF FULL TIME SUPER SPECIALIST IN .....**

- 1 Name of the Candidate : \_\_\_\_\_  
 2 Father's/Husband's Name : \_\_\_\_\_  
 3 Mother's Name : \_\_\_\_\_  
 4 Date of Birth as per SSLC Certificate : \_\_\_\_\_



Age

Years	Month	Days

- 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 Medical Council Registration No. : \_\_\_\_\_  
 15 Name of the Medical Council : \_\_\_\_\_

16 Experience :-

Sl. No.	Designation	From	To	Period


17 Presently working as Designation a) \_\_\_\_\_  
b) Name of the Institution \_\_\_\_\_  
c) Govt./ Private \_\_\_\_\_

18 NOC certificate from present employer taken/ PPO copy available (If applicable)

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 to be false/ incorrect at a later date of the recruitment/ appointment, I shall be bound by the decision of the Medical Superintendent, ESIC, PGIMS & Model Hospital, Rajajinagar, Bangalore - 10/ESI Corporation without prejudice for further action as per law.

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

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

(Signature of Candidate)

Documents Annexed:-

- 1) SSLC Certificate
- 2) MBBS Certificate
- 3) PG Certificate/ PG Diploma Certificate
- 4) Registration Certificate
- 5) Caste Certificate in the proforma of prescribed Central Government for employment in Central Government Institution.
- 6) Experience certificate/ NOC (wherever applicable)