

APPLICATION FORM FOR THE POST OF SPECIALIST GR. II (JUNIOR SCALE)
IN ESI CORPORATION-2022

1. (a) State Applied For **DELHI**
(b) Post applied for **SPECIALIST Gr.-II(Jr. Scale)**
(c) Specialty applied for _____

Affix self-attested
recent passport size
photograph here
(photograph should be
firmly pasted on this
space and not stapled)

2. Particulars of the Demand Draft/Banker's Cheque:
(a) Amount Rs. _____
(b) Name & Branch of issuing bank _____
(c) D.D. No. _____ dated _____

3. Name in full (in block letters) _____

4. Father's / Husband's Name _____

5. (a) Date of Birth (in figures) _____

(in words _____)

(b) Age as on closing date (i.e. **26/07/2022**) Year _____, Months _____, Days _____.

6. Nationality _____

7. Mailing address _____

E-mail ID _____

Mobile No. _____

8. Permanent Address _____

(with telephone number) _____

9. Sex (write 1 for Male, 2 for Female & 3 for Transgender) _____

10. (i) (a) If Person With Disability (PWD) (Yes /NO) _____

(b) Percentage of Disability _____

(ii) (a) Whether Ex-Serviceman (Yes /No) _____

(b) Date of discharge from Armed Forces _____

(iii) (a) Whether ESIC / Govt. Employee (Yes/No) _____

b) If Yes, please mention whether ESIC or Govt. Employee _____

14. Date of completion of Compulsory Rotating Internship _____

15. Registration No. and Date of Registration of MBBS or equivalent and Post Graduate Qualification (MS/MS/DNB/Diploma etc.) with the Medical Council of India/State Medical Council:

(a) MBBS or equivalent Qualification

Registration No. _____

Date of Registration _____

Name of the Medical Council (MCI/State Medical Council) _____

(b) Post Graduate Qualification (MS/MS/DNB/Diploma etc.)

Registration No. _____

Date of Registration _____

Name of the Medical Council (MCI/State Medical Council) _____

16. Trainings (if any).

Institution	Period	Field of Training

17. Academic attainments and activities _____ (Attach annexure).

18. Details of Publications (Attach annexure, if necessary):

(i)

(ii)

(iii)

(iv)

(v)

19. List of enclosures :

(i)

(iii)

(v)

(vii)

(ix)

(ii)

(iv)

(vi)

(viii)

(x)

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 affirm that No Objection Certificate from the present employer for applying this post has been applied for/taken.

If selected, I am willing to serve anywhere in India.

Place _____

Date _____

Signature of the Candidate

(FORMAT OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES APPLYING FOR APPOINTMENT TO POSTS UNDER THE GOVERNMENT OF INDIA)

This is to certify that Shri/Smt./Kumari _____ son/
daughter
of _____ of village/town _____ in District/Division
_____ in the _____ State/Union Territory _____
belongs to the _____ Community which is recognized as a backward class under the Government of India,
Ministry of Social Justice and Empowerment's Resolution
No. _____ dated _____*.
Shri/Smt./Kumari _____ and/or his/her family ordinarily reside(s) in
the _____ District/Division of the _____ State/Union
Territory. This is also to certify that he/she does not belong to the persons/sections (Creamy Layer) mentioned in column
3 of the Schedule to the Government of India, Department of Personnel & Training OM No. 36012/22/93-Estt. (SCT,) dated
08.09.1993**.

Date _____

District Magistrate/ Deputy Commissioner
etc.

Seal of Office

*- **The Authority issuing the Certificate may have to mention the details of Resolution of Government of India, in which the Caste of candidate is mentioned as OBC.**

**- As amended from time to time.

Note: The term ordinarily reside(s) used here will have the same meaning as in section 20 of the Representation of the People Act, 1950.

List of authorities empowered to issue Caste/Tribe Certificate Certificates:

- | | |
|------|---|
| i. | District Magistrate / Additional District Magistrate/ Collector/ Deputy Commissioner / Additional Deputy Commissioner/ Dy. Collector / 1 st Class Stipendiary Magistrate / Sub-Divisional Magistrate / Extra-Assistant Commissioner/ Taluka Magistrate / Executive Magistrate. |
| ii. | Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate. |
| iii. | Revenue Officers not below the rank of Tehsildar. |
| iv. | Sub-Divisional Officers of the area where the applicant and or his family normally resides. |

Note-I

a. The term 'Ordinarily' used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.
b. The authorities competent to issue Caste Certificate are indicated below:-

- | | |
|------|---|
| i. | District Magistrate / Additional Magistrate / Collector / Dy. Commissioner / Additional Deputy Commissioner / Deputy Collector / Ist Class Stipendiary Magistrate / Sub-Divisional Magistrate / Taluka Magistrate / Executive Magistrate / Extra Assistant Commissioner (not below the rank of 1st Class Stipendiary Magistrate). |
| ii. | Chief Presidency Magistrate /Additional Chief Presidency Magistrate/ Presidency Magistrate. |
| iii. | Revenue Officer not below the rank of Tehsildar |
| iv. | Sub-Divisional Officer of the area where the candidate and/or his family resides. |

Note-II

The closing date for receipt of application will be treated as the date of reckoning for OBC status of the candidate and also, for assuming that the candidate does not fall in the creamy layer.

Note-III

The candidate should furnish the relevant OBC Certificate in the format prescribed for Central Government jobs as per **Annexure 'A'** above issued by the competent authority on or before the Closing Date as stipulated in this Notice.

**Form of declaration to be submitted by the OBC candidate
(in addition to the community certificate)**

I Son/daughter of Shri.....resident of village/town/city.....
district..... state.....hereby declare that I belong to the.....community
which is recognized as a backward class by the Government of India for the purpose of
reservation in services as per orders contained in Department of Personnel and Training Office
Memorandum No 36102/22/93-Estt. (SCT) dated 8-9-1993. It is also declared that I do not
belong to persons/ sections/sections (Creamy Layer) mentioned in column 3 of the Schedule to
the above referred Office Memorandum dated 8-9-1993, O.M. No. 36033/3/2004-Estt. (Res.)
dated 9th March, 200, O.M. No. 36033/3/2004-Estt. (Res.) dated 14th October, 2008 and OM
No. 36033/1/2013-Estt. (Res.), dated: 27th May, 2013.

Signature:.....

Full Name:.....

Address:

PROFORMA OF CERTIFICATE FOR EMPLOYED OFFICIALS

I hereby, with the information available, certify that Shri _____ (Name) _____
No. _____ (Rank) _____, would complete prescribed period of
appointment on _____ (Date) _____.

Place:
Dated:

Signature
Commanding Officer Office Seal

**FORM OF UNDERTAKING TO BE GIVEN BY CANDIDATES APPLYING FOR CIVIL
POSTS UNDER EX-SERVICEMEN CATEGORY**

I understand that, if selected on the basis of the recruitment/examination to which this application relates, my appointment will be subject to my producing documentary evidence to the satisfaction of the Appointing Authority that I have been duly released/retired/discharges from the Armed Forces and that I am entitled to the benefits admissible to ex-servicemen in terms of the Ex- servicemen (Re-employment in Central Civil Services and Posts) Rules, 1979, as amended from time to time.

3) I also understand that I shall not be eligible to be appointed to a vacancy reserved for Ex-servicemen in regard to the recruitment covered by this examination, if I have at any time prior to such appointment, secured any employment on the civil side (including Public Sector Undertaking, Autonomous Bodies/Statutory Bodies, Nationalized Banks, etc.), by availing of the concession of reservation of vacancies admissible to Ex-servicemen.

Place:

Date:

Signature of Candidate