56/A/12/28/2023-Medical-Admn

1/626846/2023

क.रा.बी.नि E.S.I.C.

தொழிலாளர் அரசுக் காப்பீட்டு கழகம் कर्मचारी राज्य बीमा निगम EMPLOYEES' STATE INSURANCE CORPORATION

தொழிலாளர் & வேலைவாய்ப்புத் துறை, இந்திய அரசு श्रम एवं रोजगार मंत्रालय, भारत सरकार

Ministry of Labour& Employment, Govt. of India



சார் மண்டல அலுவலகம் उप क्षेत्रीय कार्यालय Sub Regional Office

पंचदीप भवन, 1897, त्रिची रोड, रामनाथपुरम, कोयंबत्तूर-45 Panchdeep Bhavan, 1897, Trichy Road, Ramanathapuram, Coimbatore – 641045

दूरभाष /Tele : 0422-2362301-329 फ़ैक्स/Fax : 0422-2315970 ई-मेल/Email : dir-kovai@esic.nic.in वेबसाइट/Website : www.esic.gov.in

<u>अधिसूचना</u> NOTIFICATION

ईएसआईसी, एसआरओ कोयम्बट्र की ओर से, उप निदेशक (प्रभारी) वॉक-इन इंटरव्यू के माध्यम से चुने जाने के लिए कोयंबट्र उप क्षेत्र से जुड़े ईएसआई निगम के बीमित व्यक्तियों की जांच / प्रमाणित करने के लिए अनुबंध के आधार पर अंशकालिक चिकित्सा रेफरी के लिए आवेदन आमंत्रित करता है। वॉक-इन इंटरव्यू के लिए अनुसूची और अन्य विवरणों के साथ पात्रता मानदंड यहां संलग्न हैं।

The Deputy Director(I/c), on behalf of ESIC, SRO Coimbatore invites applications for Part Time Medical Referee on Contract Basis for examining/ certifying the Insured persons of ESI Corporation attached with Coimbatore Sub region, to be selected through Walk-in Interview. The Eligibility criteria along with schedule for Walk-in Interview and other details are enclosed herewith.

Signed by
Karthikeyan M
Date: 11-08-2023 13:01:29
DY. DIRECTOR (Admn.)
VOIP 20422001

सेवा में /To

- (1) Notice Board, SRO Coimbatore
- (2) All Branch Offices of SRO
- (3) The Regional Administrative Medical Officer, ESI Scheme, Coimbatore
- (4) The Indian Medical Association, Coimbatore Branch
- (5) ESI Hospital, Singanallur
 - with a request to disseminating the above information.



தொழிலாளர் அரசுக் காப்பீட்டு கழகம் कर्मचारी राज्य बीमा निगम

EMPLOYEES' STATE INSURANCE CORPORATION

தொழிலாளர் & வேலைவாய்ப்புத் துறை, இந்திய அரசு श्रम एवं रोजगार मंत्रालय, भारत सरकार

Ministry of Labour & Employment, Govt. of India



சார் மண்டல அலுவலகம் उप क्षेत्रीय कार्यालय SUB REGIONAL OFFICE

पंचदीप भवन, 1897, त्रिची रोड, रामनाथपुरम, कोयंबत्त्र -45 Panchdeep Bhavan, 1897, Trichy Road, Ramanathapuram, Coimbatore – 641045

दूरभाष /Tele : 0422-2362301-329 फ़ैक्स/Fax : 0422-2315970 ई-मेल/Email : dir-kovai@esic.nic.in वेबसाइट/Website : www.esic.gov.in

WALK-IN-INTERVIEW FOR APPOINTMENT OF PART TIME MEDICAL REFEREE

Eligible candidates are invited for walk in interview for appointment as Part time Medical referee on contract basis for examining the Insured persons of ESI Corporation in Coimbatore Sub region.

SI	Location	No. of	Qualification	Experience
No.		Post		
01	Coimbatore.		A recognized MBBS degree	04 Years regular Service
			qualification included in the First	in Level 10 (Rs 56100/-
	On occasional	01	schedule or second schedule or	to 1,77,500/-) in the Pay
	basis may need		Part II of the Third schedule (other	Matrix.
	to travel branch		than licentiate qualifications) to	
	offices located		the Indian Medical Council Act,	<u>Desirable</u> :
	at Ooty, Erode		1956(102 of 1956). Holders of	Retired ESIC/ Central/
	and Tiruppur		Educational qualifications include	State Government
	districts		in Part II of the Third Schedule	Senior Medical Officers/
			should also fulfill the conditions	doctors
			specified in sub-section (3) of	
			section 13 of the Indian Medical	
			Council Act, 1956 (102 of 1956).	

Schedule and place of Interview: 25 August 2023 from 11:00 AM onwards at Sub Regional Office, Coimbatore
Employees State Insurance Corporation
Panchdeep Bhavan, # 1897, Trichy Road, Ramanathapuram
Coimbatore, TN – 641 045

Registration for interview/ duly filled application forms may be forwarded to this office/ nearby ESIC Branch office(s) under SRO Coimbatore under marking a copy through mail to dir-kovai@esic.nic.in before date of Interview.

Age: Should not be more than 64 Years as on date of Interview i.e. on 25 August 2023

Period of Contract: For one year (on temporary basis) or till the regular Medical Referee is appointed/ posted, whichever is earlier. It may be extended by another one year based on performance and on their request.

Honorarium/ Remuneration: Rs 35,000/- p.m. consolidated.

Number of Sessions & Duration: 15 sessions per month which should not be less than two hours

(Between 10:00 AM to 06:00 PM Monday to Friday)

Other Terms and conditions:

1. The part time medical referee will be liable to attend any branch office as per requirement.

2. Transportation and other allowances will be admissible during tours as per instructions in

vogue.

3. No other perks/ benefits such as HRA, NPA, CCA etc admissible.

4. The appointment shall not confer any right or preference for regular appointment.

5. No claim for any service benefits like PF, pension, gratuity, medical allowance, seniority and

promotion etc. from this contract appointment will be admissible.

6. The part time medical referees will be under supervision of State Medical Officer of Tamilnadu,

ESI Corporation.

7. Termination of service by giving one month notice by either side.

8. No TA/ DA will be admissible for joining.

9. The competent authority reserves the right to reject any or all applicants without assigning any

reason thereof.

Instructions for Candidates:

(i) Duly filled in application form in the prescribed format as per Annexure-1 and original

certificates are to be brought for verification along with the self attested photo copies of certificates in

support of age, qualifications, experience and two passport size photographs should be submitted at

the time of walk-in-interview.

(ii) An undertaking for submission of true information - to be submitted by the candidates as per

Annexure-II

(iii) Candidates should produce any original Govt. issued photo Identity card like Aadhar card/

Election photo ID/ Passport/ Driving License etc. at the time of interview.

-sd-

Deputy Director-in-Charge

Date: 11 August 2023

Place: Coimbatore

ANNEXURE- I

APPLICATION FOR THE POST OF PARTTIME MEDICAL REFEREE (PTMR)

Please affix self attested passport size photograph

1.	Name of the Candidate	:		
2.	Father's/Husband's Name	:		
3.	Gender	: Male/ Female/ Others		
4.	Date of Birth (In Christian Era)	: DD/MM/YYYY		
5.	Age as on 25-08-2023	:		
6.	Mobile Number	:		
7.	E-mail ID	:		
8.	Nationality	:		
9.	Address (Permanent)	:		
10.	Address for Correspondence	:		
	· 			

S. No.	Name of organization with designation	From	То	Job description
13. I	List of enclosures: 1			
	2			
	3			

ANNEXURE-II

UNDERTAKING

I hereby declare that the information given above is true and correct to the best of my knowledge and belief. In case any information is found to be false /incorrect at a later date of the recruitment/appointment, I shall be bound by the decision of the Competent Authority.

		(Signature of Candidate)
Place:		
Bute.		
Date:		