



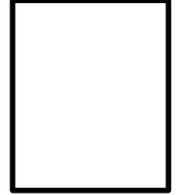
कर्मचारी राज्य बीमा निगम
(श्रम एवं रोजगार मंत्रालय, भारत सरकार)
EMPLOYEES' STATE INSURANCE CORPORATION
(Ministry of Labour & Employment, Govt. of India)
वेबसाइट/ Website: www.esic.gov.in



क. रा. बी. नि. चिकित्सा महाविद्यालय एवं अस्पताल,
पाण्डेयपुर, वाराणसी, - 221002
ESIC Medical College & Hospital,
Pandeypur, Varanasi- 221002.
मेल/ Email: dean-varanasi.up@esic.gov.in

Application Form: Advertisement No. 08/2025

1. Name :
2. Father's/Husband's Name :
3. Age & Date of Birth :
4. Post applied for :
5. Specialty applied for :
6. Part time/Full Time :
7. Religion & Caste :
8. Category (UR/OBC/SC/ST/EWS) :
9. (i) Whether PWD (Person with disability)
(ii) If Yes, % of disability :
10. Educational Qualifications :



Sr. No	Degree/Diploma	Year of passing	University	%(percentage)

11. Experience (in years):
12. Registration Details:
13. Present Address with Pin code:
14. Permanent Address:

15. Contact No : 1. Mob: 2.Mob:

16. Email ID (in capital letters):

17. Interview Online /Offline;

Date

Signature of candidate

Testimonials to be enclosed: -

D.D. towards application fee if applicable

Xerox copies of following documents, as applicable

1.MBBS Degree 2. DNB/PG Degree/Diploma 3. Registration Certificate 4. Experience Certificate 5. Caste Certificate (where applicable) 6. Date of Birth Certificate 7. Any other relevant documents