कर्मचारी राज्य बीमा निगम आदर्श अस्पताल एवं व्यवसायजन्य रोग केन्द्र



ESIC Model Hospital Cum Occupational Disease Centre (श्रम एवं रोजगार मंत्रालय, भारत सरकार) (आईएसओ 9001:2008 प्रमाणित संगठन)

(Ministry of Labour & Employment, Govt. Of India) (An ISO 9001:2008 Certified Organisation) सेंट्रल रोड, एम.आई.डी.सी. क्षेत्र, अंधेरी (पूर्व), मुंबई – 400093 टेलीफैक्स: 022-28203266 Central Road, M.I.D.C. Area, Andheri (East), Mumbai – 400093 Telefax: 022 28203266

FINAL RESULT (IN ORDER OF MERIT) FOR RECRUITMENT TO THE POST OF ECG TECHNICIAN FOR MAHARASHTRA REGION (DATE OF ADVERTISEMENT : 02-12-2015)

Based on the performance of candidates in the Written (Online) Examination held on 22nd May, 2016 followed by document verification held on 17th March at ESIC Model Hospital cum ODC, Andheri (E), Mumbai, the following candidate has been provisionally selected for the post of ECG Technician for Maharashtra region:

<u>SELECT LIST</u>								
SI. No.	Application Reference No.	Roll Number	Name of the Candidate	Date of Birth	Category/ Sub- Category	Category against which finding place in Select List		
1	4030228738	41105400002	GHAWAT MAYURI DNYANDEO	15-09-93	OBC	UR		

The result of following candidate finding place in the Select List is withheld for verification of documents:

SI No	Dotoronco	Roll Number	Name of the Candidate	Date of Birth	Category/ Sub- Category	Category against which finding place in Select List	Remarks
1	4030146877	41143400027	M MAHESH KUMAR	29-07-87	OBC	OBC	Candidate may visit this hospital for verification of documents on 06-09-17

The result of following candidate finding place in the Select List is **CANCELLED** as per details mentioned below:

SI. No.	Application Reference No.	Roll Number	Name of the Candidate	Date of Birth	Category/ Sub- Category	Category against which finding place in Select List	Remarks
1	4030125253	41143400011	DALBIR SINGH	07/02/84	OBC	UR	The candidate has already joined this hospital vide vacanay advertised in 2012

Important Note:

- 1. While every care has been taken in preparing the result, however ESI Corporation reserves the right to rectify the errors/omissions, if any comes to its notice.
- 2. The 'Offer of appointment letter to the selected candidates will be issued shortly.
- 3. The candidature of the above candidate is provisional subject to fulfilment of eligibility criteria for the post and verification of the original certificates/documents in support of date of birth, educational qualification, category/sub category, experience, etc.
- 4. Those candidates who are in Govt. Service (including ESIC Employees) are required to produce No Object Certificate (NOC) at the time of verification.
- 5. Candidates belonging to OBC Category are required to submit latest OBC certificate in the prescribed proforma of Govt. of India appended below at Annexure A and along with Form of Declaration appended below at Annexure B at the time of verification.
- 6. Candidates seeking age relaxation as Government Employee/ESIC Employee shall have to produce Service Certificate at the time of verification.
- 7. Further the candidature of the above candidate is provisional subject to biometric verification and genuineness of the candidate.

sd/-

Dated: 23-08-2017

SARIKA KAKKAR Assistant Director (Recruitment Branch) For- MEDICAL SUPERINTENDENT

Annexure 'A'								
(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./Kumarison/daugh ofof village/town in District/Division in theState/Un Territorybelongs to theCommunity which recognized as a backward class under the Government of India, Ministry of Social Justice a								
in District/	Division in the	State/Union						
Territory	belongs to t	he Community which is						
recognized	as a backward class under the Governm	ent of India, Ministry of Social Justice and						
		dated						
Shri/Smt./k	(umarianc	l/or his/her family ordinarily reside(s) in						
(Creamy La	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 Offi	ce							
*_	The Authority issuing the Certificate may h Government of India, in which the Caste of	ave to mention the details of Resolution of candidate is mentioned as OBC.						
**_	As amended from time to time.							
Note:	The term ordinarily reside(s) used here will have Representation of the People Act, 1950.	ve the same meaning as in section 20 of the						
List of auth	orities empowered to issue Caste/Tribe Certif	icate Certificates:						
Dy. (i. District Magistrate / Additional District Magistrate/ Collector/ Deputy Commissioner / Additional Deputy Commiss Dy. Collector / 1 st Class Stipendiary Magistrate / Sub-Divisional Magistrate / Extra-Assistant Commissioner/ Talu Magistrate / Executive Magistrate.							
ii. Chie	Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate.							
iii. Reve	Revenue Officers not below the rank of Tehsildar.							
iv. Sub-	Divisional Officers of the area where the applicant and	l or his family normally resides.						
Note-I a. b.	The term 'Ordinarily' used here will have the same the Representation of the People Act, 1950. The authorities competent to issue Caste Certificate	e are indicated below:-						
Note-II Note-III	 Commissioner / Deputy Collector / Ist Class S Magistrate / Executive Magistrate / Extra Assis Stipendiary Magistrate). ii. Chief Presidency Magistrate /Additional Chief iii. Revenue Officer not below the rank of Tehsild iv. Sub-Divisional Officer of the area where the c The closing date for receipt of application will candidate and also, for assuming that the car The candidate should furnish the relevant OE 	andidate and/or his family resides. I be treated as the date of reckoning for OBC status of the						

Annexure 'B'

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

Signature:	•
Full Name:	•

Address