APPLICATION FOR THE POST OF MEDICAL OFFICER UNDER OFFICE OF ADMINISTRATIVE MEDICAL OFFICER, MAHARASHTRA EMPLOYEES STATE INSURANCE SOCIETY, BIBVEWADI, PUNE-411037

Ph.No. 020-29993422,

Email- establishpune.amo@gmail.com

Advertise No. 10/2024

Date 04.07.2024

INTERVIEW FOR POST OF MEDICAL OFFICER

Details of Posts as below

Medical officer Group A and Group B

Contractual posts in AMO	Posts	Open	EW	SC	ST	VJN T	NT	NT	NT	SBC	OBC
office/MH-ESI Dispensary (newly started)	to be filled		S			(A)	(B)	(C)	(D)		
AMO Office Pune	06	03		02	01						
Dispensary Sp. Centre	01	01									
Chinchwad											
Dispensary Sanaswadi	02	1 (w)		01							
Dispensary Ranjangaon	02	1 (w)		01							
Dispensary Uruli	04	1 (H)			01		01				01
Kanchan											
Dispensary Kurkumbh	02			1 (w)		01					
Dispensary Wagholi	01			01							
Dispensary Lonavla	02	1 (w)		01							
Dispensary Hinjwadi	02	1 (w)		01							
Dispensary Talegaon	01								01		
Dispensary Saswad	01			01							
Dispensary Chakan	01			01							
Dispensary Baramati	02	1 (w)		01							
Dispensary RajguruNagar	01			01							
Dispensary Pirangut/Paud	03	01			_					01	
		1 (w)									
Dispensary Mulshi	01	-			1(w)						
Total	32	12		12	3	1	1		1	1	1

(Note- S-sport person, W-women, H-handicap)

If eligible candidates from respective categories are not available then other eligible candidates will be considered from the merit list.

* At present some posts are filled by contract candidates in following dispensaries. Viz. Mulshi/ Pirangut/ Urulikanchan/ Kurkumbh/ Talegaon MIDC/ Sp. Center Chinchwad/ Saswad/ Lonawla/ Sanaswadi/ Wagholi/ Hinjewadi/ Baramati/ Chakan/ Ranjangaon/ Rajgurunagar/etc. If Vacancy arises in above mentioned all places, then selected candidates will be considered.

Qualification: M.B.B.S

Age: Should be less than 69 years as on 15.07.2024.

Selection Of Procedure:

Applications are to be submitted in the prescribed Proforma either by email / post or by hand. (establishpune.amo@gmail.com)

- a) Selection will be made on basis of interview of candidate, which will be conducted by the duly constituted selection committee.
- b) The final selection will be based purely on performance in personal interview

Pay allowances: Candidates appointed on contractual basis will be paid consolidated Pay as per Maharashtra Government GR dated 29/05/2020

General Condition:

- a) Last date of submission of application for the above post is on 15.07.2024 till 05.00pm
- b) Interview will be conducted on 16 July, 2024, from 11.00 am to 4.00 pm at "OFFICE OF ADMINISTRATIVE MEDICAL OFFICER, GROUND FLOOR, PANCHDEEP BHAVAN, Sr. No. 689/90, BIBVEWADI, PUNE-411037." Candidate should be present at interview with original certificates.
- c) No TA/DA will be admissible for interview or joining.
- d) This appointment will be only on temporary basis and no claim for permanent service, any services like PF, Pension, gratuity, medical allowances, Seniority, Promotion. Only casual leave will be permitted as per rule.
- e) In the above only Mulshi/ Kurkumbh/ Urulikanchan/ Alandi-Markal/ Talegaon MIDC/Khed-Shivapur/Pirangut Paud service dispensary (5 doctor dispensary) will be open in two shifts (from 08:00 a.m. to 08:00 p.m.)
- f) Other terms and conditions will be applicable as issued by Maharashtra government and competent authority from time to time.
- g) If candidate wishes to resign, candidate should give one month notice.
- h) Selected candidate will be required to deposit a Security Deposit of One month payment in favour of Administrative Medical Officer, MH-ESIS, Pune at time of Joining which is refundable after completion of contract period and production of "No Dues Certificate", and candidate will submit Original M.B.B.S. Registration Certificate at the time of Joining.
- i) Security Deposit will not be refundable, if contractual medical officer resigns within three months.
- j) Selected candidate shall be appointed on purely contractual basis for the maximum period of 364 days.
- k) No private Practice is allowed during the tenure of service in MH-ESIS.
- 1) Providing Police verification and medical fitness certificate will be responsibility of this candidate.
- m) The MH-ESIS reserves the right to cancel the recruitment process at any stage at its discretion and such decision will be binding on all concerned.

- n) The contractual engagement may be terminated /discontinued without assigning any reason.
- o) Knowledge of Marathi Language and Handling of Computer is essential.
- p) M.M.C. Registration must.
- q) Rs.100 Bond should be submitted after joining (Declaring not working any other Hospital or Office on prescribed format).

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<u>IN</u>	<u> TERVIEW I</u>	FOR PO	OST OF	MEDICAL OF	FICER		
1. Name in full (in b	olock letters):						
2. Fathers/Husband'	's Name:						
3. Date of Birth (DD	/MM/YYYY)	:					
4. Religion:							
5. Caste:							
6. Category:							
7. Mailing address:							
8. (a) E-Mail id :							
(b) Mobile No.:.							
9. Residential addre	ss:				• • • • • • • • • • • • • • • • • • • •	•••••	
10. Permanent addre	ess:			•••••	• • • • • • • • • • • • • • • • • • • •	•••••	
11. Sex: Male / Fen	nale						
12. Date of Registra	tion in State	medical	council:				
13. Essential Educa	ational and I	Professi	onal Qua	alification (grad	luate level o	nwards)	
Name & address of	University		ation	Degree/	Subject	Percentage	
college		From	То	Examination Passing year		of Marks obtained	
				i assing year		Onumeu	
	1	I					

14. Preferred Location:

Sr. No.	Place
1	
2	
3	

DOCUMENTS TO REQUIRED:

- 1. Valid MCI / State medical council registration certificate
- 2. Matriculation Certificate for Age Proof
- 3. Proof of Educational Qualification (Passing, Internship Completion and Degree Certificate)
- 4. Copy of Caste Certificate
- 5. Copy of Caste Validity
- 6. Experience Certificate (if available)
- 7. Copy of Pan card,
- 8. Copy of Aadhar card,
- 9. Two Photographs

All copies of above documents are to be self-attested before submission.

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.

Place:	Signature of Candidate
Date:	