



Format of Application

(Fill form with black/blue ink in BLOCK letters and to be scanned and mailed to dean-indore.mp@esic.gov.in)

- Post applied for (Faculty with Post/Senior Resident) :-
- Name in block letters :
- Father's/ Husband's name :
- Date of Birth :
- Age as on **(02/03/2026)** :
- Category (please tick) :- UR ()/SC ()/ST ()/OBC ()/EWS ()/PwD() : Specify (caste) :
- Post Notified Under Category :
- **Mode of Interview** : **Offline**
- **Particulars of Demand Draft, if applicable :- Name of Bank**
D.D. No., Date
- Qualifications (MBBS/MD/MS/DNB/PG Diploma etc. with Certificates)

Affix recent self-attested passport size photograph

Please add rows and columns as per requirement in table

Sl.No.	Qualifications	Board/University	Year of Passing	Marks	Division	Attempts

Experience (as per the post notified) Govt./Pvt. Hospital/Institution (..... Years/.....Months) with Certificates:

- 1.
- 2.
- 3.
- 4.
- 5.

- MCI/State Regn. No. :
- Telephone No: Res : _____ Mobile : _____
- E-mail : _____
- Permanent Address :
- Present Residential Address:
- Whether Married/ Unmarried :
- Nationality & Mother tongue :
- Aadhar No :
- Identification Mark :

DECLARATION :

I undertake that all the above information given above by me is correct to the best of my knowledge and I solemnly affirm that if any information given by me found wrong at any stage, my candidature for the post will automatically stand cancelled.

Date :

(Signature of Candidate)

Check List of enclosures attached :-

- | | | |
|---|---|-----------------|
| 1. Date of Birth Certificate (matriculation) | : | Yes / No |
| 2. Proof of Identity (Aadhaar/PAN card/Driving license/other): | : | Yes / No |
| 3. UG Certificate | : | Yes / No |
| 4. Diploma / PG Certificate | : | Yes / No |
| 5. MCI / State Registration Certificate | : | Yes / No / N.A. |
| 6. Experience Certificate / NOC, if applicable | : | Yes / No / N.A. |
| 7. Research Publications, if applicable | : | Yes / No / N.A. |
| 8. Caste (SC/ST/OBC/EWS/PwD) Certificate (latest),
if applicable | : | Yes / No / N.A. |
| 9. Residential Address Proof | : | Yes / No |

Important

(Read before filling forms)

- Only one form should be filled by candidate for each applied post.
- Forms should be filled by candidate with clear and bold letters.
- Photograph should be with clearly visible face, both ears & signed across the photograph.
- All documents with self-attestation must be scanned and sent as **PDF ONLY** arranged in sequence as per check list latest by **04.00 PM of 02/03/2026**.
- Canvassing in any form will debar the candidature at any stage.

Appointment letter will be issued on the day of announcement of results.

- For any assistance call recruitment officer-in-charge@ **94250 52398 (Dr. Sunil Narwariya)** from 9:00 am to 4:00 pm only.

