कर्मचारी राज्य बीमा निगम
(श्रम एवं रोजगार मंत्रालय, भारत सरकार)
Employees' State Insurance Corporation
(Ministry of Labour & Employment,
Govt. of India)

चिकित्सा महाविद्यालय एवं अस्पताल
Medical College & Hospital
देसूला, एमआई ए , अलवर (राज.)-301030
Desula, MIA, Alwar (Raj.)-301030
E-mail:- dean-alwar.rj@esic.nic.in
ms-alwar.rj@esic.nic.in
website:- www.esic.nic.in/www.esic.nic.in

**Advertisement No. 06/2026 Date:-22-09-2026**

ADVERTISEMENT FOR RECRUITMENT OF **09 POST FOR JUNIOR RESIDENT (FOR 01 Year) AND 09 TUTOR(FOR 01 Year)** FOR ESIC MEDICAL COLLEGE & HOSPITAL, ALWAR (RAJASTHAN)

**Date of apply of application:- 08.10.2026**
**Interview Date:-Date for interview or screening test will be intimated accordingly.**

**VENUE FOR INTERVIEW**
**ACADEMIC BLOCK, ESIC MCH, ALWAR, RAJASTHAN - 301030**

| | |
|---|---|
| **Vacancy Detail for JR** | 05-UR, 02-OBC, 01-SC, 01-EWS |
| **Vacancy Detail for Tutor** | 03-UR, 04-OBC, 01-ST, 01-EWS |

1. All seats will be filled for a maximum period of 01 year or joining of ESIC Bond Junior Resident and regular Tutor, whichever is earlier.
2. Seat of Tutor will be filled against vacant post in departments.
3. Interested candidates should report for apply of application on 08.10.2026 from **09.00 AM to 11:00 AM** at **ACADEMIC BLOCK, ESIC MCH, ALWAR,RAJASTHAN – 301030.**
4. Detailed advertisement & application form can be downloaded from website **www.esic.gov.in** → recruitment.

**Eligibility Criteria:-**
**AGE:-**

1. Not exceeding 30 years as on the date of interview

**QUALIFICATION:-**

1. MBBS from recognized University.
2. Internship should also be completed as on the date of Interview.
3. Candidate should be registered with NMC/MCI/State Medical Council.

**EMOLUMENTS:-**

1. Consolidated Remuneration will be as per central Govt pay matrix under Level 10. (As per ESIC Hqrs. Letter No. Z-17/11/1/2007/Med. IV (Pt. File) dated 13.04.2022. Approximate amount of Rs. 1,12,054/- month.

**Amount of Application Fee (shall be collected at the time of interview only in cash)**

| Sl. No | Category | Fee Amount |
|---|---|---|
| 1 | SC/ ST/ ESIC (Regular employees)/ Female Candidates, Ex-servicemen & PH candidates | Nil |
| 2 | All other categories | 500/- |

**How to apply:-**

1. The eligible and desirous candidates, along with their application filled properly in prescribed Performa "Annexure-A" should appear document verification and collection.
2. The application form is also being uploaded on www.esic.nic.in
3. The candidate should bring two recent passport size photographs along with one set of attested photocopies and original of testimonials.

**Terms & Condition:-**

1. Vacancies are likely to change at the time of Interview.
2. No TA/DA will be paid to the candidates for appearing for document collection/verification and interview. The candidate arrange for stay at own level to appear for same. Venue for the document collection/verification will be notified to the candidates on the Notice Board at ground floor opposite dean office.
3. ***The interview or screening test (if Necessary) date will be intimated/announced separately on ESIC website or Notice Board as per administrative feasibility.**
4. The selection of the candidate and merit list shall be based purely on the basis of the oral interview.
5. The Dean/Medical Superintendent reserve the right to fill up all or not to fill up any vacancy.
6. The Dean/ Medical Superintendent reserve the right to alter the date or cancel the interview.
7. Selected candidate will have the deposit security deposit of Rs. 50,000/- in State Bank of India ESI Fund Account No. 1 Payable at MIA, Alwar.
8. Private practice of any kind will not be allowed.
9. Hostel Accommodation/Quarter may be provided as per availability.
10. Candidate should bring their own application form.
11. Result of the interview shall be published on the official website of ESIC and offer of appointment to the successful candidates through e-mail only.
12. Other terms of condition will be applicable as issued by competent authority from time to time.

Digitally signed by
Sunil Kumar
Date: 22-09-2026
12:22:37

**Advt. No: 06/2026**

**Deupty Director (Admn.)**
**ESIC Medical College &**
**Hospital, Alwar, Rajasthan**

Annexure 'A'

## APPLICATION FORM FOR JUNIOR RESIDENT AND TUTOR

| Advertisement No | | Please affix Recent Passport size photo |
|---|---|---|
| Name of the Post | | |

**Personal Details [IN CAPITAL LETTERS]**

| 1. Full Name (Dr.) | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | | | | | | | | | |

| 2. Father's/ Husband's Name | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | | | | | | | | | |

| 3. Address for Correspondence with PIN Code Number | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
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| | | | | | | | | | | | | | | | | | | | |

| 4. Permanent Address with PIN Code Number | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | | | | | | | | | |
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| 5. E-Mail Id (IN BLOCK LETTERS ONLY) | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 6. Phone/Mobile No | + | 9 | 1 | | | | | | | | | | | | |
| Alternate Number (Mobile/Landline) | + | 9 | 1 | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |

| 7. Date of Birth [Please attach document for evidence] | D | D | M | M | Y | Y | Y | Y | 8. Nationality | |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | G. State to which you belong | |

| 10. Aadhar Number | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

| | Type of Disability | |
|---|---|---|
| **11. If Physically Challenged Candidate [Please attach document for evidence]** | | **% of Disability: ……..** |

| **12. Category [Please Tick Only)** | **UR** | **OBC** | **SC** | **ST** | **EWS** |
|---|---|---|---|---|---|
| | | | | | |

| **13. Application Fees (if Applicable)** | **DD No/Online Transaction No.** | **Amount** |
|---|---|---|
| | | **Rs. 500/-** |

**14. Details of Educational Qualifications**

| **Examination Passed** | **University/Board/Institution/ Council of Examination** | **Month, Year of passing** | **No. of Extra Attempts** |
|---|---|---|---|
| **Secondary [10th]** | | | |
| **Senior Secondary [12th]** | | | |
| **MBBS** | | | |
| **Any other [ ]** | | | |

| **15. RMC/NMC Registration** | |
|---|---|

| **Name of Organization** | **Period of Service** | |
|---|---|---|
| | **From** | **To** |
| | | |
| | | |

*****Bring the original and self- attested photocopies of related documents and publications at the time of Document verification/Interview.

I hereby declare that the information given above is true and correct to the best of my knowledge and belief. In case of any information found to be false/incorrect at a later stage, I shall be bound by the decision of the DEAN, ESIC Medical College & Hospital Alwar / ESI Corporation without prejudice for further action as per law.

Place :

Date : **Signature of the Candidate**