



EMPLOYEES' STATE INSURANCE CORPORATION
COLLEGE OF NURSING, KALABURAGI
[Ministry of Labor & Employment, Govt. Of India]
SEDAM ROAD, KALABURAGI-585106

Tel. No.: 08472-265546/47/48

Fax No.: 08472-265545

No. 532/GLBNC/A/12/27/1/2018

Date:26/08/2022

Engagement of Part Time Teaching Faculty (Hourly Basis) for ESIC College of Nursing, Kalaburagi.

Employee' State Insurance Corporation is a statutory body constituted under an Act of parliament (ESI Act, 1948) and works under the administrative control of Ministry of Labor and Employment, Government of India. Employee' State Insurance Corporation proposes to fill up the Part Time teaching faculty (Hourly Basis) for ESIC College of Nursing, located at Kalaburagi, Karnataka on part Time basis through inviting online applications for the following posts from date of advertisement (within 14 days) to the below mentioned mail id.

Sl.No	Faculty for Subjects	Number of Post	Teaching Hours/Year	
			Theory	Practical
1	Sociology	01	60 hrs	-
2	Computer	01	15 hrs	30 hrs

Qualification & Experience

The Candidate should have post-graduate Qualification and teaching experience in the respective subject. Preference will be given to faculty having teaching experience in the above mentioned subjects/concerned subjects working Kalaburagi and Nursing Colleges locally.

Age Limit:

The age shall not exceed 66 years for all the posts (As on the date of advertisement).

Duties/Remuneration

Theory: Rs.400/hr

Practical: Rs.200/hr

Period of engagement

Initially for one year for the academic year 2021-2022

Documents required

1. Prescribed application form enclosed with this notification must be printed on A4 size paper and properly filled up and uploaded.
 2. Recent self-attested color passport size photograph.
 3. Self-attested copies of certificates and testimonials in support of (i) proof of age (Date of Birth) (ii) Aadhaar card (iii) Educational Qualifications: (Graduate, post Graduate, & any other) (iv) Teaching experience issued by the Head of the institute or Head of the Department.
- ❖ **Number of vacancies is provisional and may increase or decrease depending on actual requirement.**

For details, please log on to website www.esic.nic.in.

Selection Procedure:

1. The selection will be made on the basis of Teaching Experience and the eligibility criteria.
2. Result will be displayed on website: www.esic.nic.in.

General Conditions:

1. Application form should be filled & uploaded in the prescribed format along with the required documents to the below mentioned mail Id. Applications found to be incomplete will be summarily rejected.
2. Wrong declarations/ Submission of false information or any other action contrary to law shall lead to cancellation of the candidature at any stage.

The ESIC reserves the right to cancel the recruitment process at any stage at its discretion and such decision will be binding on all concerned.

Candidate may forward the filled application forms along with required documents to the Email: deanmc-gb.kar@esic.nic.in

Note: Candidates may Contact to the **DEAN, ESIC MEDICAL COLLEGE**, Kalaburagi, Karnataka contact details 08471-265546-265547 contact between 11:00 AM to 04:00 PM through E-mail: deanmc-gb.kar@esic.nic.in

Sd/-
DEAN

ANY OTHER QUALIFICATION				

13. WORK EXPERIENCE

Sl. NO	POST HELD	INSTITUTION	PERIOD DATES(FROM---TO)	TOTAL PERIOD (IN MONTHS/YEAR)

14. HAVE YOU EVER BEEN DISMISSED OR PUNISHED: _____ ?

DECLARATION

I do hereby declare that all the statements made by me in this application are true, complete and correct to the best of my knowledge and belief, I am fully aware that in the event of any particulars or information furnished by me is found to be false/ incomplete/incorrect or ineligible or for indulging in some unlawful act, my candidature for the post is liable to be rejected/cancelled and in the event of any statement/information found false/incorrect even after my appointment, my services are liable to be terminated without any notice.

DATE:

PLACE:

SIGNATURE OF CANDIDATE

CHECK-LIST OF ENCLOSURES (SELF ATTESTED):

- | | |
|---|----------|
| 1. MATRICULATION CERTIFICATE AS PROOF OF AGE | (YES/NO) |
| 2. DEGREE CERTIFICATES AND MARKS SHEET OF UG/PG | (YES/NO) |
| 3. EXPERIENCE CERTIFICATES, WHEREVER REQUIRED | (YES/NO) |
| 4. TWO RECENT PASSPORT SIZE PHOTOGRAPHS | (YES/NO) |
| 5. SELF ATTESTED COPY OF AADHAAR | (YES/NO) |

SIGNATURE OF THE CANDIDATE

ANY OTHER QUALIFICATION				

13. WORK EXPERIENCE

SI. NO	POST HELD	INSTITUTION	PERIOD DATES(FROM----TO)	TOTAL PERIOD (IN MONTHS/YEAR)

14. HAVE YOU EVER BEEN DISMISSED OR PUNISHED: _____ ?

DECLARATION

I do hereby declare that all the statements made by me in this application are true, complete and correct to the best of my knowledge and belief, I am fully aware that in the event of any particulars or information furnished by me is found to be false/ incomplete/incorrect or ineligible or for indulging in some unlawful act, my candidature for the post is liable to be rejected/cancelled and in the event of any statement/information found false/incorrect even after my appointment, my services are liable to be terminated without any notice.

DATE:

PLACE:

SIGNATURE OF CANDIDATE

CHECK-LIST OF ENCLOSURES (SELF ATTESTED):

- | | |
|---|----------|
| 1. MATRICULATION CERTIFICATE AS PROOF OF AGE | (YES/NO) |
| 2. DEGREE CERTIFICATES AND MARKS SHEET OF UG/PG | (YES/NO) |
| 3. EXPERIENCE CERTIFICATES, WHEREVER REQUIRED | (YES/NO) |
| 4. TWO RECENT PASSPORT SIZE PHOTOGRAPHS | (YES/NO) |
| 5. SELF ATTESTED COPY OF AADHAAR | (YES/NO) |

SIGNATURE OF THE CANDIDATE