



OIL AND NATURAL GAS CORPORATION LIMITED
MBA BASIN, RECRUITMENT & PROMOTION SECTION
HISCO HOUSE, ANNEX BUILDING, 1st FLOOR,
50- J.L. NEHRU ROAD, KOLKATA-71.
PH.033-23012322/2326

WALK-IN-INTERVIEW FOR CONTRACT MEDICS.

Advertisement No.MBA/HR-R&P/Contract Medics/CBMDP/01/2013

ONGC, a Maharatna Central PSU, wishes to engage suitable and interested candidates as Contract Medics for 04 posts (2 Posts: Field Medics - Full Time) and (2 Posts: Field Medics - Part Time) for its CBM Development Project at Bokaro, Jharkhand for a period from 15/06/2013 to 30/06/2014 on a fixed honorarium of `60,000/- for **Full Time** and `31, 400/- for **Part Time**. Candidates with MBBS having valid Registration with MCI are invited to appear for a walk-in-interview at **ONGC office, CBM Development Project, 1st floor, HSCL Building, Nayamore, Bokaro Steel City, Bokaro - 827001, Jharkhand** at 10 A.M on **14/05/2013 (Tuesday)** along with typed bio-data (format available in www.ongcindia.com), recent passport size photograph and original educational qualification certificates along with attested copies of the same. The Job is purely on contract basis and does not carry any liability on ONGC for regular appointment at any stage. Field Medics may be posted at drill site/installation {(current locations at Durgapur (West Bengal) for Full Time and at Barkagaon in Hazaribagh and Parbatpur in Bokaro for Part Time)}.

Chief Manager (IE)-R&P

OIL AND NATURAL GAS CORPORATION LIMITED
MBA BASIN

Affix self
attested recent
passport size
photograph

Application for the Post of Field Medic (on Contract)
(To be filled in BLOCK letters)

1. Name of the Candidate :
2. Father's name :
3. Date of Birth :
4. Present address for communication :
5. Permanent address :
6. E-Mail address :
7. Telephone/Mobile number :
8. Whether SC/ST/OBC/GEN/PC :
(Submit certificate of Competent Authority)

9. Qualifications: -

Sl. No.	Examination Passed	Board/University	Passing Year	Class	% of Marks	Remarks

10. Registration number of Medical Council :

11. Experience

Sl. No.	Work Place	Post Held	Period		Last Pay	Nature of duty
			From	To		

I certify that the above information is correct and attested copies of supporting documents are enclosed.

Signature

Date:
Place: