

# ଓଡ଼ିଶା ଜଳ ବିଦ୍ୟୁତ୍ ନିଗମ ଲିମିଟେଡ୍

### ODISHA HYDRO POWER CORPORATION LIMITED.

OFFICE OF THE SENIOR GENERAL **MANAGER (ELECTRICAL)**BALIMELA HYDRO ELECTRIC PROJECT, POST: BALIMELA, DIST: MALKANGIRI (ODISHA), PIN: **764 051**.

Phones: 06861 -232581 (0)/232641 (R). FAX- 06861- 232541.< E mail- unit.head\_balimela@yahoo.com > REGISTERED OFFICE: ODISHA HYDRO POWER CORPORATION LIMITED.

(A Government of Odisha Undertaking)

ODISHA STATE POLICE HOUSING & WELFARE CORPORATION BUILDING, VANIVIHAR CHOUK, JANAPATH, BHUBANESWAR-751022 Tel.: 91-0674-2542983, 2542802, 2545526, 2542826, Fax: 254102, GRAM: HYDROPOWER,

e-mail: ohpc.co@gmail.com / md@ohpcltd.com, WEB: www.ohpcltd.com /CIN: U40101OR1995SGC003963

BHEP: HRD/ESTT: / 5955 / Balimela, Dated the, 05/10/2023

#### **ADVERTISEMENT**

Balimela Hydro Electric Project, Balimela, Dist:-Malkangiri a Unit under Odisha Hydro Power Corporation limited, a Gold Rated State PSU invites applications for engagement of Medical Retainer in OHPC Health Centre, Balimela on contract basis as detailed below.

SI. No.	Name Of The Post	No. of Post	Age Limit	Qualification	Monthly Remuneration	Period of Contract
1	Medical Retainer	1		Must have MBBS		
			Maximum ago limit	degree from an	Do 1 05 000/	1 Year
				Institute recognized	Rs. 1,05,000/- (Remuneration	
			Maximum age limit	by Medical Council of	`	
			is Upto 67 years (as	India & shall have	Rs.65,000 +	likely to
			on 01.10.2023)	valid registration	Incentive Rs.	be
				certificate from	40,000)	extended
				Odisha Council of		
				Medical Registration		

The applications alongwith all testimonials and passport size photograph should reach the undersigned **latest by 15.11.2023.** For details in regard to eligibility criteria and general terms & conditions and prescribed application format please visit our OHPC website at **www.ohpcltd.com** 

Sd/General Manager (Elect.)
Balimela Hydro Electric Project, Balimela



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## ELIGIBILITY CRITERIA AND GENERAL TERMS & CONDITIONS FOR ENGAGEMENT OF MEDICAL RETAINER ON CONTRACT BASIS AT OHPC HEALTH CENTRE, BHEP, BALIMELA

- 1. The engagement will be purely temporary and on contractual basis. The engagement can be terminated at any time without assigning any reason thereof.
- 2. The selected candidates will have to give an undertaking to the effect that he / she will not claim regular appointment in future.
- 3. The candidate shall have above 21 years of age and the maximum age limit is 67 years as on 01.10.2023.
- 4. The candidate must have passed MBBS degree from an Institute recognized by Medical Council of India. The candidates having MD/MS qualification in any discipline shall be given preference.
- 5. The candidate shall have valid registration certificate from the Odisha Council of Medical Registration.
- 6. The candidate having knowledge in Odia shall be preferred.
- 7. The Retired Govt. Doctors within the above prescribed age limit and having the above required qualifications and registration certificate can apply for the post.
- 8. The candidate must be in good mental condition and bodily healthy and free from any physical defect which may likely to interfere in the discharge of his / her duties assigned to the post.
- 9. Application duly filled in the prescribed format (as enclosed) should be addressed to the Unit Head, B.H.E.P, Balimela, At/Po: Balimela, Dist: Malkangiri (Odisha), Pin: 764051 and sent through Registered Post / Speed Post only to reach on or before **15**<sup>th</sup> **November 2023**. Applications received after due date shall not be considered.
- 10. Two numbers Self Attested Passport size photographs shall be submitted alongwith the application.
- 11. Self Attested photo copies of the certificates and mark sheets of **HSC**, **+2 Science**, **MBBS & MD/MS (if any)** etc. shall be submitted alongwith the application. Further the candidates if having relevant experience may also enclose experience certificate alongwith the application.
- 12. The self attested photo copy of registration certificate issued by the Odisha Council of Medical Registration (OCMR) shall also be submitted alongwith the application.
- 13. The authority reserves the right for selection or rejection of any or all applications received without assigning any reason thereof. The authority also reserves the right to increase or decrease the number of Medical Retainers to be engaged without assigning any reason thereof.
- 14. Any form of canvasing will lead to disqualification of the candidates.
- 15. Candidates are required to visit website: **www.ohpcltd.com** at regular intervals for any notification, updates, results etc. and any further communications in this regard.
- 16. No personal correspondence / queries will be entertained. All required communication will be made through E-mail / Official website / Notice Board and also by Post.
- 17. Applications submitted in incomplete shape, without proper documents or invalid documents shall not be entertained.
- 18. The provision of Service Quota for getting the benefit of additional weightage of marks in Post Graduate Selection Test as issued by Dept. of Health & Family Welfare, Govt. of Odisha will be extended to the Medical Retainer / Doctor engaged on contract basis at OHPC Health Centre, BHEP, Balimela.

**Encl:** Prescribed application format.

Sd/-General Manager (Elect.) Balimela Hydro Electric Project, Balimela

### **APPLICATION FORM**

Application for the Post of : Medical Retainer

(On Contract basis)

Affix passport

Size recent Photo copy

1. Name of the Candidate

(In Block Letters)

2.

Father's Name :

3. Permanent Address :

5. Present Address / Address for correspondence

6. Date of Birth :

7. Age as on (01.10.2023) :

8. Male / Female :

9. Nationality :

10. Caste (SC/ST/SEBC/UR)

(Sports Men/Person with Disabilities if any please mention with proof)

11. Registration Number :

12. Education Qualification :

Exam. Passed	Name of the Institution / Board / University	Year of Passing	Total Marks	Secured Marks	% Marks

- 13. Experience if any:
- 14. List of documents enclosed.
  - (a)
  - (b)
  - (c)
  - (d)
  - (e)
- 15. Contact No: Mob. / Phone:
- 16. E-mail Id:

#### **DECLARATION**

I do hereby declare that all the information furnished above are true to the best of my knowledge and belief.

Date:

Signature of the Applicant