

EMBASSY OF INDIA, KATHMANDU (NEPAL) VACANCY : ECHS



1. Ex-servicemen Contributory Health Scheme (ECHS) is a medical scheme launched by Govt of India to provide free medical treatment to the Ex-servicemen (ESM) pensioners and their dependents of Indian Armed Forces. Applications are invited for following posts at Type 'E' (Mobile) Polyclinic, Butwal. Employment will be on contractual basis without any pensionary benefits :-

Ser No	Category	Max Age during submission of application	Basic Qualification	Work Experience	Desirable Attributes	Salary in NPRs Per Month
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THE VACANCIES ARE FOR TYPE 'E' (MOBILE) ECHS POLYCLINIC AT BUTWAL

(a)	Medical Officer	63	MBBS	Min 05 years after internship preferable addl qualification in medicine/ surgery	Merit in MBBS PG/ Other Additional Qualification. Experience more than 5 years.	NPR 1,20,000/-
(b)	Nursing Assistant (Nurse/ General)	53	 (i) BSc Nursing. Or (ii) GNM Diploma/ Class I Nursing Assistants Course (Armed Forces) 	Minimum 05 years experience	Degree in Nursing/any diploma course in Specialty nursing. Experience of more than 10 years	NPR 44,960/-
(c)	Driver	53	Education-8 class (Class-1 MT driver (Armed Forces) Possess a civil driving license	Min 5 yrs experience as driver	Heavy vehicle driving license. Experience of more than 10 years. First Aid Course	NPR 31,520/-

2. Eligible candidates after short listing will be telephonically informed to be present for interview with their original documents. Preference will be given to the Indian Ex-servicemen with the requisite qualifications. Last date for submission of application is **06 Aug 2023**. Application may please be forwarded at the address mentioned below.

Kapurdhara	ch, Embassy of India			
(a)	Date and time of Interview	-	Will be informed subsequently.	
(b)	Place of interview	-	Defence Wing, Embassy of India, Kathmandu.	

Terms & Conditions.

1. <u>Age</u>. Candidates should meet the age criteria mentioned above.

2. <u>Contractual Terms & Conditions</u>. The contract will be for a period of one year subject to review of their conduct and performance during the employment. The contractual employees will not be entitled to any allowance, financial benefits or concessions as admissible to Govt employees.

3. <u>Working Hours</u>. The working hours for other posts would be 48 hours per week (8x6).

4. <u>Medical Fitness</u>. Medical Fitness certificated has to be produced.

5. <u>Attestation Form</u>. An Attestation form as enclosed herewith is required to submitted alongwith the application form.



Ex-Servicemen Contributory Health Scheme (ECHS) Embassy of India, PO Box 292, 336 KapurdharaMarg, Kathmandu (Nepal). Ph : 01-4430520, Website : www.indembkathmandu.gov.in



APPLICATION FORM FOR EMPLOYMENT IN ECHS

								Paste your	
Name	of the Post :							recent	
Name	of the Applicant :							passport size photograph	
If Ex-s	If Ex-servicemen, Service No, Rank,								
Arms / Services, Unit last served								L	
and d	ate of retirement			·					
S/o, I	S/o, D/o, W/o								
Date o	of Birth : Date M	onth	\	/ear					
Sex : 1	Male / Female								
	Address :								
								be attached)	
	e No								
	Email ID Education Qualification (Attach attested photocopy of certificates) :								
Ser	Qualification /	Year		-	name of So		%	Year	
No.	Degree	passi	-		ege / Instit		Marks		
(a)	10 th								
(b)	12 th								
(c)	Graduation								
(d)	Post Graduation								
(e)	Diploma / Degree								
Work	Work Experience (Experience Certificate must be attached for consideration of experience								
Ser	Place of work / Na		Pe	riod of en	nployment		rience	Reason for	
No.	Institute / Designa			From	То		ficate ched	leaving the job	
	nppolitiments in	Appointments held					/ No)	J00	
(a)									
(b)									
(c)									
(d)									
(e)									
Designet	ration No. and Date	of	viata	ationiti				of monistration	

10. Registration No. and Date of registration with MCI/ NMC (Photocopy of registration and NagriktaPramanPatra (NPP) to be attached).

11. Declaration by the applicant :

"I hereby declare that all the statements made and information provided by me in the Application Form are true. I also understand that in case, any of these is found false, I shall be disqualified forthwith for the post applied for or my engagement with ECHS shall be terminated forthwith and I shall also be liable for legal action".

Place : _____

Dated : ___/___/2023

Photo	Photo
	ANNEXURE-II

<u>ATTESTATION FORM</u> (Verification of locally recruited staff in Mission/Post Abroad.)

"WARNING"

If the fact that false information has been furnished or that there has been suppression of any factual information in the attestation form comes to notice at any time during the service of the person, his services would be liable to be terminated.

1.	Name in full (in block capitals)	SURNAME	NAME						
1.	With aliases, if any.								
	(Please indicate if you have added or								
	dropped at any stage, any part of your								
	name surname)								
a)	Passport No., Place, Country & date of	issue							
b)	Nationality								
2.	Present address in full:								
3	Permanent address in full:								
2									
	D i 1 C 1 (with noniada) wh	ore you have reside	d for more than one						

Particulars of places (with periods) where you have resided for more than one 4. year during the preceding five years.

se of stay.

5. Name	Nationality	Place of Birth.	Occupation if employed (give designation & full address)	Permanent Home address
a) Father's	name in full			
	ases if any.			
	ases if any.			

2

6. (a)Place of birth : Distt. & State in which situated

(b) Date of birth

- 7. (a) Your religion
 - (b) (To be filled in only by persons of Indian origin) Are you a member of Scheduled Caste/Scheduled Tribe? Answer 'Yes' or 'No', and if the answer is 'Yes' state the name thereof)

8. Educational qualification showing places of education with years in School and

Examination passed

9. If you have at any time been employed, please give details of your previous and present employment.

Designation or post held or description of work	<u>To</u>	Full address of the office firm or Institution	Full reasons leaving previous job.	for the

10. (a) Have you ever been arrested, prosecuted, kept under detention, bound down/fined/convicted by a court of law for any offence? If so, give details.

(b) Have you ever been the subject of proceeding in a court of law?

3 11. Name of two responsible persons of your locality or two references to whom you are known. (Give full address & Occupation).

(i)

(ii)

I certify that the foregoing information is correct and complete to the best of my knowledge and belief. I am not aware of any circumstances which might impair my fitness for employment.

Place	Signature of the candidate
Date	Designation

(Certificate to be signed by National justice of Peace, Magistrate, or Member of Parliament or any other authority prescribed by the appointing authority)

Place Date	Signature Designation or Status and address		
i)	Name, designation and full address of the appointing authority.	-	
ii)	Designation or the post held by the person in respect of whom enquiry is made.	-	
iii)	Date from which working in the present capacity.	-	
iv)	Date of joining the Mission.	-	