



PARADIP PORT TRUST
PARADIP - 754 142, ODISHA (INDIA)
ADMINISTRATIVE DEPARTMENT



No.AD/RSC-I-21/16/2013(Pt.I)/3324

Dated, the 19th Sept., 2017

WALK-IN-INTERVIEW

(1) Paradip Port Trust intends to engage the following persons on **contract basis**.

Sl No	Post	Recruitment Rules/Qualification	Numbers of Posts	Age	Remuneration (Consolidated)
1	Specialist in Paediatrics, Surgery, Anesthesia, Orthopaedics & Pathology	i)MBBS Degree from a recognized University and ii)P.G. Degree in the subject discipline. iii)Experience of 7(Seven) years in the relevant discipline.	5 nos.	Upto 65 years	Rs.75,000/- per month
2	Medical Officers	i)MBBS Degree from a recognized University. ii)5(five) years of experience in a Hospital, after completion of internship of one year. iii) Desirable:- A Post Graduate Medical Degree from a recognized University.	3 nos.	Upto 65 years	Rs.65,000/- per month
3	Dy.Marine Engineer	i) MOT II Class Motor Certificate issued under Merchant Shipping Act,1958. ii) 2(two) years of experience as independent Watch Keeping Engineer on board a foreign going ship.	2 nos.	Upto 35 years	Rs.50,000/- Per month

(2) Other conditions:

- 1) The contract Period is of one year and extendable further based on the Performance.
- 2) Management reserves the right to waive the age limits or experience criteria, depending on the necessity for engaging on contract basis.
- 3) **Interested candidates may please Walk-In with their Curriculum vitae,** original certificates of qualification and experience etc. and a format copy enclosed herewith, duly filled in on **25.09.2017** at **1100 hours** at the following address:-

Office of Chairman,
Paradip Port Trust,
Po-Paradip Port,
Dist- Jagatsinghpur,
Odisha-754142.

- 4) Canvassing in any form will be a disqualification.
- 5) PPT reserves the right either to cancel the notification or increase/decrease the number of posts without assigning any reason thereof.
- 6) No TA/DA will be paid for appearing the walk-in-interview.

Sd/-
Secretary,
Paradip Port Trust

FORMAT TO BE FILLED BY THE CANDIDATE

Name & Address with phone No. & e- mail ID	Date of Birth & Age	Qualifications	Registration No.	Work Experience				Remarks
				From	To	Designation	Name of the company	
1	2	3	4	5	6	7	8	9

Date:

Signature of Candidate

