



कर्मचारी राज्य बीमा निगम
(श्रम और रोजगार मंत्रालय, भारत सरकार)
EMPLOYEES' STATE INSURANCE CORPORATION
(MINISTRY OF LABOUR & EMPLOYMENT,
GOVERNMENT OF INDIA)



चिकित्सा शिक्षा प्रकोष्ठ, ईएसआईसी, मुख्यालय
MEDICAL EDUCATION CELL, ESIC, HEADQUARTERS
पंचदीप भवन: सी. आई. जी. मार्ग, नई दिल्ली-110002
PANCHDEEP BHAWAN: C.I.G. MARG, NEW DELHI-02
ई-मेल: dmc_dl@esic.nic.in; mecell.hq@esic.nic.in

L-11/12/3/SOP/CLINICALTRAINING&AFFILIATION/2024-MEC

दिनांक 19.08.2024

Addendum

विषय/**Subject**- Implementation of policy for Clinical training and affiliation of private Nursing and Paramedical Institutes with ESIC Hospitals.

In continuation to this office Notice dated 18.07.2024 (attached) on the above captioned subject, it is reiterated that the entire application form including Annexure I, II & III and accompanying documents are to be submitted BOTH :

(1) As **scanned copy** by Email to **mecell.hq@esic.nic.in** by 06.09.24 **AND**

(2) As **Hard Copy(In Original)** by 06.09.2024.

It is also reiterated that **all pages** of the Notice, application form and its annexures & enclosures are to be signed by the Managing Trustee, Principal or Authorised Signatory

तपन कुमार ढाली/ Tapan Kumar Dhali
विशेष कार्याधारी (चि. शि.)/ Officer on Special Duty(ME)

सेवा में/To

1. ESIC Website Content Manager.
2. All Deans of ESIC Colleges/PGIMSR and all MSs of ESIC Hospitals.
3. Directorate Medical Delhi (DMD).
4. All Regional Directors
5. All Zones IC



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सं/No.L-11/12/3/SOP/CLINICALTRAINING&AFFILIATION/2024-MEC दिनांक 18.07.2024

Notice

विषय/Subject:- ईएसआईसी अस्पतालों के लिए निजी नर्सिंग और पैरामेडिकल (सहयोगी और स्वास्थ्य सेवा पेशेवर) संस्थानों का नैदानिक प्रशिक्षण और संबद्धता शैक्षणिक वर्ष 2025-26 हेतु / Clinical training and affiliation of Private / Govt. Nursing and Paramedical (Allied and Healthcare Professional) institutions to the ESIC hospitals for the academic year 2025-26

1. Applications are invited for Clinical training and affiliation of Govt./Private Nursing and Paramedical (Allied and Healthcare Professional) institutions to the ESIC hospitals for the Academic Year 2025-26 from the interested Educational Institutions (Govt / Private Nursing, Allied and Healthcare Professional Colleges).

2. Guidelines for affiliation of Govt. / Private Nursing/Para-medical Institutes with ESIC Hospitals:-

- i. Only one Institution per course will be granted permission for a given session, for uniform supervision by parent institution and ESIC Hospital.
- ii. The affiliated college will not use the ESIC Logo or ESIC affiliation information in any signboard, brochure, pamphlet, advertisement and any electronic media publicizing its affiliation information to general public/prospective candidates. If such an act is done and noticed by any of the ESIC Organization by self or brought to its notice by some external agency/ media, the affiliation of concerned college will be terminated summarily by giving one month's termination notice. No further representations will be entertained in this case. The college will have to apply afresh in the next academic year.
- iii. This facility of clinical training will be approved initially for one year which may be extended up to 03 Years. Fresh application and MoU will be required if the Govt./Private Institute requires further affiliation.
- iv. **Distance:** The College applying for affiliation should not be at a maximum distance of more than 30 kms from the ESIC Hospital, where the affiliation is applied for. However, for Hilly and Tribal Area as specified in the Indian Nursing Council Affiliation Guidelines, it can be located up to the distance of 50 kms from the ESIC Hospital.
- v. A maximum of 100 students will be permitted for clinical training

programmes at one hospital for one academic year.

- vi. The faculty requirements for imparting training to the students will be the sole responsibility of the affiliating college.
- vii. For the purpose of Educational/Clinical training of students at hospitals, the charges, as applicable, to be paid by the institutions to ESIC:
- viii. The charges payable during the contract period will be subject to any change in the govt rates, effective from the date of issue of orders.
- ix. Institution shall pay charges (fee) in advance before starting the clinical training to students.
- x. MoU to be signed between ESIC Hospital and the Govt./Private Institutions (Parent Institutions) before starting the clinical training.
- xi. **Affiliation of private colleges in respect of Allied and Healthcare professions will be considered only after the National Commission for Allied and Healthcare Professions comes out with complete guidelines in this regard. However, Institutions in respect of allied and healthcare professions run by Central / State Govts/Municipal Bodies can be considered as per the SoPs (attached with this notice)**
- xii. The ESIC reserves the right to reject any or all the applications received for affiliation without assigning any reason. The decision of the Director General in this regard will be final.

Completed Application Forms comprising Annexure I , II & III and accompanying documents are to be submitted BOTH by Email AND in Hard Copy.

The E-Mail copy will be received only up till 06.09.2024 . The accompanying hard copy must also reach by 06.09.2024.

चिकित्सा शिक्षा प्रकोष्ठ / **Medical Education Cell**

Annexure - 1

Format of application Form:

1	Name of Course for which affiliation with ESIC Hospital is desired	
2.	Name of the Parent Institution & Address.	
3.	Name of Owner & Type of ownership: (Central Govt./State Govt./PSU/Municipal Body/Private)	

4.	Name of ESIC Hospital (with more than 100 commissioned beds) with which affiliation is desired.	
5.	Distance of above ESIC Hospital from Parent Institution by road.	
6.	Hostel facilities for students:	YES/NO
	IF YES;	YES / NO
	A. Own full time hostel facilities available for more than 50% of the total approved intake strength of students B) Own full time hostel facilities available for less than 50% of the total approved intake strength of students	YES / NO
7.	Number of courses Approved & Conducted by the College with details.	
8.	Total strength of students approved by :-	
	a. Respective Nursing Council for all category of Nursing Courses b. Regulatory Body for para-medical courses	
9.	Total no. of students proposed to be sent for training per academic year	
10.	Does the College / Institution have 100 bedded parent hospital of its own?	YES / NO
11.	Year from which the institution is awarding Degrees continuously (uninterrupted award of Degrees)	

Signed_____

Managing Trustee/Principal/
Authorised Signatory

Date_____

Place _____

NOTE:

- All the statements, 1 to 10 should be supported by duly attested photocopies of relevant documentary proofs.
- An undertaking on Rs. 100/- non-judicial stamp-paper as below is to be enclosed.
- Letter of authorization of signature from Managing Trustee / Principal to be enclosed in case of authorized signatory.
- The relevant cut-off date for evaluation of Point No. 6, 7 & 10 will be **16.08.2024**.
- The applications will be considered strictly as per the policy of ESIC for clinical training & affiliations of Nursing and Paramedical Institutions, which is attached to this notice.
- Separate applications have to be submitted for each course and for each ESIC hospital with which affiliation is desired.
- All Pages of the Notice, application form, & its enclosures to be signed by the Managing Trustee, Principal Or Authorised Signatory.

Annexure - II**UNDERTAKING**

(on Rs. 100/- Non-Judicial Stamp-paper duly attested by Notary Public/Oath Commissioner)

The undersigned verifies that all the statements made in the applications form dated _____ submitted by the _____ for affiliation to the ESIC Hospital _____ for training of its students are correct to the best of the knowledge and the belief of the undersigned. All the documents to the applications are authentic.

If it comes to the notice of the ESIC that any of these statements / documents are false or fabricated then, the ESIC is free to initiate Civil / Criminal Legal action against the undersigned.

Name _____
 Designation _____
 Signature _____
 Managing Trustee/Principal/
 Authorised Signatory

Date _____
 Place _____

WITNESS:

1.

Annexure III**CHECKLIST**

Name of College _____

Name of Course for which affiliation desired

Sl. No.	Documents required to be enclosed (Attested Photocopies only)	YES / NO
1.	Address Proof of Parent Institution	

2.	Proof of ownership of Parent Institution & its type (Central Govt./State Govt./PSU/Municipal Body/Private)	
3.	Proof of existence of Hostels & their number	
4.	Proof of no. of approved courses conducted by the College	
5.	Proof of total strength of students approved by regulatory body (Nursing Council/Para-medical regulatory body)	
6.	Proof of Essentiality Certificate from the State Govt.	
7.	Proof of having its own 100 beds parent hospital	
8.	Proof of distance of parent Institution by road from ESIC Hospital for which affiliation is required	
9.	Proof of Year from which the institution is awarding Degrees continuously applied for (uninterrupted award of Degrees)	
10.	Copy of Aadhar Card/PAN Card of Managing Trustee, Principal & Authorised Signatory	
11.	Completed Annexure I, II & III and Copy of Notice duly signed on all pages	
12.	Letter of Authorisation in the case of Authorised Signatory	

Name _____
 Designation _____
 Signature _____
 Managing Trustee/Principal/
 Authorised Signatory

Date: _____