

ZILLA SWASTHYA SAMITI : MALKANGIRI

Advertisement No 17 /2009

Dated 21.1.09

CONTRACTUAL ENGAGEMENT

Application are invited from suitable candidates for filling up the following posts on contractual basis under Mobile Health Unit.

SLNo	Name of the post	No of posts	Qualification	Remuneration	Age
1	Doctor(Aynsh)	04 nos	Must have passed BAMS and BHMS with valid registration certificate.	Rs.8000/- + Insensitive allowance Rs.2000/- PM	Maximum 50 year
2	HW(F)	08 nos	Must have passed HSC Examination and must have undergone 1 and ½ years training for Multipurpose health worker (female) at the approved Govt. Training centers, Orissa	Rs.3500/- + Insensitive allowance Rs.300/- PM	Maximum 45 year
3	Drivers	05 nos	Must have Passed Class-VII with valid Driving license light or heavy vehicle of 4 wheelers .	Rs.3000/- PM	18 to 32 Years Relaxed 05 years to SC/ST, 03 years to SEBC

Interested candidates fulfilling the eligibility criteria are requested to apply in the prescribed format to the under signed on or before 8.2.2009 through Regd.post/Speed post. And the application must be super scribed as "POST APPLIED FOR". The completely filled up application form along with other relevant documents should be reached CDMO, Malkangiri in time. Candidates are requested to logo on the web site i.e www.malkangiri.nic.in for details and downloading of application form or contact CDMO Office for details. Incomplete application in any form is liable for rejection and the office is not responsible for any postal delay. The undersigned reserves the right to cancel or reject any or all applications without assigning any reason thereof.

Memo No 18 /2009

Copy to Editor , Sambada News papers for information and request to please publish of the above items immediately.

sd/
C.D.MO, Malkangiri.

Dated 21.1.09

Memo No _____ /2009

Copy forwarded to the D.I.O, NIC, Malkangiri for information and necessary action. He is requested to display the above Advertisement in the District website for wide publicity.

[Signature]
C.D.MO, Malkangiri.

Dated 21.1.09

copy notice Board of collectorate, mleg/45-4/Deby
copy mleg

[Signature]
C.D.MO, Malkangiri.

APPLICATION FORM FOR HW(F)

Post Applied for		Attested Photograph				
1. Name of the Applicant:						
2. Father's Name:						
3. Date of Birth:	4. Sex:					
5. District of Domicile:						
6. Present Contact Address:						
Permanent Contact Address:						
7. Languages spoken/written:						
8. Education: High school onwards, please list all your qualifications						
Degree	Institute/Board & Location	Year	Marks			Full/Part Time/ Distance Learning
			Full Mar k	Mark s Secu red	%	
Matriculation						
+2						
+3						
P.G.						
Regd. No of Nursing Council (attach attested copy of Registration Certificate)						
Additional qualifications (if any)						
9. Employment Record:						
Years of experience :						
10. Details of Employment: (Use separate sheets if required).						

Starting with your present employment, list in reverse order all the employments you have had.		
11 A. Current Employment:		
From Month / Year	To Month / Year	Designation
	Till date	
Location of Employment:		
Description of your duties:		
11B. Previous Employment:		
From Month / Year	To Month / Year	Designation
Location of Employment:		
Description of your duties:		
Signature of the Applicant		

Note:

1. The following documents are to be enclosed along with the application:

- a) Residential /Nativity certificate issued by the Tehsildar/Sub-Collector etc.(duly attested)
- b) Attested photo copies of all mark sheets/certificates in proof of the claim made by the candidate relating to educational qualification. (Matriculation, +2, +3, ANM Training(for Addl ANM)/
- c) Experience certificate if any.
- d) Two copies of passport size colored attested photograph to be submitted along with the application.
- e) Attested copy Registration Certificate in case of Addl. ANM.

TERMS AND CONDITIONS

- The engagement is purely contractual in nature and can be terminated at any point without citing any reasons thereof.
- Candidates once engaged cannot claim for re-engagement under any conditions as a matter of right.
- The contract is initially for a period of eleven months and further extension if any, will be provided on assessment of the performance of the period in service.
- Candidate appointed on contractual basis will not claim for inter-district transfer.
- These engagements are non-transferable in nature and the candidates have to stay at their place of posting failing which they are liable to be disengaged.

APPLICATION FORM FOR HW(F)			
Post Applied for		Attested Photograph	
1. Name of the Applicant:			
2. Father's Name:			
3. Date of Birth:		4. Sex:	

Application form for contractual appointment of Diver

1. Name of the Applicant:-
2. Father 's Name:-
3. Whether ST/SEBC:-
4. Name of the District in which he belongs to:-
5. Present Address:-
6. Permanent Address:-
7. Date of Birth:-
8. Educational Qualification:-
(Copy of Certificate to be attached)
9. Whether having valid Driving license Certificate:-
(Copy of Certificate to be attached)
10. Experience certificate:-
(Copy of Certificate to be attached)
10. Employment Exchange Registration Certificate:-

I do hereby declared that all the information's given in the applications are true, complete and correct in all respects. In the event of any information given hereby is found false or incorrect at any stage hereafter my candidature selection and appointment shall be liable to cancelled with out any notice to me.

Signature of the Applicant.

Eligibility of candidate to apply FOR DRIVER.

1. The applicant should have registered his name in the Employment Exchange , Malkangiri
2. Should be citizen of India and preference will be given to the local candidates of Malkangiri district.
3. Should have passed class-VII as Educational Qualification.
4. Should have attained the as of 18 yrs and not more then 32 years.
5. The upper age limit shall be relaxed by 5 years of in case of ST and 3 years in case of SEBC category.
6. Should have got valid Driving licenses of light or heavy vehicle of 4 wheelers
7. performance will be given to the experienced candidates who are working / engaging in the Govt. offices
8. Supported experience certificate should be submitted.
9. The authority is not bound to assign any region for rejection of any application and also reserves the right to cancel or postponed the appointment.

APPLICATION FORM DOCTOR(AYUSH)



Post Applied for		Attested Photograph				
1. First Name:		Last Name:				
2. Date of Birth:	3. District of Domicile: (Attach Res. Certificate)	4. Sex				
5. Please mention if SC/ ST/ OBC: General						
6. Present Contact Address:		Permanent Contact Address:				
9. Email Address:-		10. Mobile No. / Phone No.				
Educational Qualification						
Degree	Institute/Board & Location	Year	Marks			Full/Part Time/ Distance Learning
			Full Mark	Marks Secured	%	
Matriculation						
+2						
+3						
BAMS/BHMS						
PG						
Regd.No.orissa State Ayurvedic Council/Homeopa thic Board (attested copy of Registration certificate)						
Experience if any.						
Sl. No	Name of the Organization	Year of Experience	From	To	Nature of Job	

Declaration:

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

Date :-

Place :-

Signature

**1.
ELIGIBILITY
CRITERIA
FOR AYUSH
DOCTORS.**

1.

e candidate must have a bachelor degree in BAMS/BHMS from a recognized university and must have registered his/her name in the respective Ayurvedic and Homeopathic Council/ Board of Orissa.

2. She/He should have passed Oriya up to ME standard.
3. Preference will be given to the candidates belonging to the same district.
4. Residential certificate is to be produced while applying for the post.

LIST OF ENCLOSURES TO BE SUBMITTED,

1. The following documents are to be enclosed along with the application
2. Attested photo copies of all mark sheets/certificate in proof of the claim made by the candidate relating to his educational qualification.
3. Registration certificate of Orissa State Homeopathic Board /Ayurvedic Council.
4. Experience Certificate if any
5. Two copies of passport size coloured attested photograph to be submitted along with the application(attested)

TERMS AND CONDITIONS

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