

Zilla Swasthya Samiti, Deogarh National Health Mission, Deogarh



No. 3311

Date: 18.09.2024

NOTICE

Application are invited from the contractual employees of NHM working in the same post under OSH&FW Society in other district desiring to be posted in Deogarh district against the vacant post mentioned below.

SI.No.	Name of the Post	Category wise vacancy
1.	M.O. (MBBS) SNCU	02
2.	M.O. (MBBS)DEIC	01
3.	Pediatrician, DEIC	01
4.	Psychiatric Social Worker	01
5.	Psychiatric Nurse	01
6.	Accountant-cum-DEO / Block Account Manager	01
7.	Counselor, RMNCH+A	02
8.	Medical Officer, Ayush (ST) (Ayurvedic)	01
9.	Office Assistant	01

Interested eligible in-house candidates may long to www.deogarh.nic.in for details terms and conditions and application form etc. may apply to the relevant post in the prescribed form to the office of the Chief District Medical & Public Health Officer-cum-District Mission Director, Deogarh on or before 30.09.2024. by 5.00 PM only through speed post / registered post / Courier. Application received after the due date & time will not be considered. Number of vacancies under this advertisement is provisional which may be increase or decrease depending upon the actual vacancy. Time to time notification regarding status of section process will be web hoisted in district website. The undersigned reserves the right to cancel / reject any or all the applications without assigning any reason thereof. This office will not be responsible for any postal delay.

CDM & PHO-cum-DMD, Deogarh.



Zilla Swasthya Samiti, Deogarh National Health Mission, Deogarh



Other Terms & Conditions:

- All positions are contractual in nature for a period of 11 months, which can be extended depending upon requirement and suitability.
- The application should reach the undersigned on or before 30.09.2024..... by 5.00 PM through Courier, Regd. Post / Speed Post only. The application must be superscripted as "Application for the post of" otherwise the application will be rejected. This office will not be held responsible for any postal delay. Incomplete application in any form will be rejected.
- The Criteria of selection shall be the highest length of incumbency under the society & as per the reservation category applicable, if any.
- For the purpose of calculation of incumbency, the last uninterrupted service in the same post under the society shall be taken into account.
- The application form need to be downloaded at www.deogarh.nic.in and filled in application form alongwith the colour passport size photograph, self attested photocopies of all relevant certificates, mark-sheets, experience certificate mentioning length of service & NOC shall be submitted by the applicant.
- No personal query will be entertained.
- Selection will be done as per the guideline stipulated by Mission Directorate, NHM, Odisha.

12.9.24

\$ 17 M	W.T.	(5.74-1) ±	APPLICATION FORM							
Advertis	sement No						Photog	raph		
Post Ap	plied for									
	ne of the Candidates Block Letters)									
2 (I). Date of Birth:			? (ii). Age as on date of advertisement.				3. Sex:			
4. Distri	ct of Domicile:	5. Ple	ease mentio	n Categ	ory (SC/ST/	OBC/SE	BC/UR):	305		
Pin Cod	nt Contact Address:				Pin Code:					
9. Email Address:				10.Mobile No.:						
11. Lang	guages spoken/written:					6250191				
12. Con	nputer Literacy:									
13. Aca	demic & Professional Qualit	fication: High s	chool onwa	rds, plea	ase list all y	our qual	ifications			
		Institute/			Marks		i e e e	Full/Part		
SI. No.	Examination Passed	Board/ University	Year of Passing	Full Mark	Marks Secured	% of Mark	Duration of course	Time/ Distance Learning		
1	English State State									
2							Simo com			
3										
4										
5	Shear San									
14. Em	ployment Record:									
Tot	al years of post-qualification	n experience								
	ars of experience in the Dev		or /NGO:							

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YES THE	etails of Employn	nent: (Use	separate sheets	if required).			
Starti	ng with your pres	ent emplo	yment, list in re	verse order all the e	mployments you l	have had.	
15 A.	Current Employ	ment					
From Month / Year			To Month / Year		e of Employer:	Nature of Business	
Desig	nation:						
	ting to (Name, Do	esignation	& Contact No of				
Locati	on of Employmer	it:		- N - N - N - N - N - N - N - N - N - N			
		ment					
188.5	Previous Employ				Name of	Nature of Business	
188.5	Name of the post	From (DD/M M/YY)	To (DD/MM/Y Y)	Location of Employment:	Employer:		
15 B. Sl.N	Name of the	(DD/M	(DD/MM/Y				
15 B. Sl.N	Name of the	(DD/M	(DD/MM/Y				
15 B. SI.N	Name of the	(DD/M	(DD/MM/Y				

I do here by declare that the information furnished above are true to the best of my knowledge and belief and that, if at any stage, it is found that any of the above information is false /incorrect or is suppressed by me, my candidature/appointment is liable to be rejected/terminated. I also declare that I have never been disengaged from service previously on administrative ground such as disobedience /poor performance/misbehavior/criminal activities etc.

Full Signature of the Applicant

Note: The following documents are to be enclosed with application

- Self-Attested photo copies of all Mark sheets & Certificate in proof of the claim made by the candidate relating to his/her educational qualification, age and other reservation option.
- 2. Two copies of passport size color self-attested photograph to be submitted along with the application
- 3. Photocopies self-attested of Cast certificate issued by the Competent Authority.
- 4. Photocopies self-attested PWD Certificate, Sport person, Ex-serviceman.
- 5. NOC-cum-Continuation Certificate to be attached & experience certificate of previous employment.
- 6. One number of self-address envelop (Size 24" X 10") with stamp of Rs.40 (Fourty Only)

In case of submission of incomplete application including non-attachment of one or more of the above document the candidate is liable to be rejected.

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