

జిల్లా వైద్య ఆరోగ్యశాఖాధికారి వారి కార్యాలయము , విశాఖపట్నం

ఆర్ సి నం.1049/ఇ2/2022

తేది 19-01-2023

పత్రికా ప్రకటన

శ్రీ కమీషనర్ , వైద్య & ఆరోగ్య శాఖా , విజయవాడ , ఆంధ్ర ప్రదేశ్ & శ్రీ ప్రాజెక్ట్ డైరెక్టర్ ఆంధ్ర ప్రదేశ్ స్టేట్ ఎయిడ్స్ కంట్రోల్ సొసైటీ వారి ఆదేశాలు ప్రకారం ఈ క్రింద తెలిపిన పోస్ట్ లను (NTEP Programme & APSACS Programme) కాంట్రాక్టు పద్ధతి పై మెరిట్ మరియు రిజర్వేషన్ ల ప్రకారం వైద్య కార్యాలయంలో నియామకంలు జరుపుటకు అనుమతించిన కారణముగా దరఖాస్తులు కోరడమైనది.

క్రమ సంఖ్య	పోస్ట్ వివరములు	ప్రోగ్రాం	ఖాళీల సంఖ్య	విద్యాఅర్హతలు	పారితోషికం (జీతం) నెలకు
1	Senior Medical Officer – DR-TB Centre	NTEP	01	1.MBBS or equivalent degree from institution, recognized by National Medical Commission. 2.Must have complete compulsory rotator internship . 3.One year experience of working in NTEP.	Rs.56,250/-
2	ART Medical Officer	APSACS	01	1.Essentially be an MBBS or equivalent degree from institution, recognized by National Medical Commission. 2.Must have complete compulsory rotator internship . 3.Trained by NACO at one of the NACO designated training centres	Rs.72,000/-
3	Senior TB Supervisor	NTEP	01	1.Bachelor' Degree OR recognized sanitary inspector's course institution 2.Certificate course in computer operation (minimum 2months) 3.Permanent two wheeler driving license & should be able to driver two wheeler.	Rs.33,975/-

గమనిక: సదరు పోస్టుల ఖాళీల సంఖ్యలలో స్వల్ప మార్పులు ఉండ వచ్చునని తెలియ చేయడమైనది.

కావున అర్హతగల అభ్యర్థుల తమ దరఖాస్తులను <https://visakhapatnam.nic.in> నుండి డౌన్లోడ్ చేసుకొని సంబంధిత నకళ్ళను జతపరచి తేది 20-01-2023 నుండి 24-01-2023 వరకు సాయంత్రం 05.00 గంటలలోపు జిల్లా వైద్య ఆరోగ్యశాఖాధికారి వారి కార్యాలయము , విశాఖపట్నం నందు సమర్పించ గలరని కోరడమైనది.

సం/- డాక్టర్ పి. జగదేశ్వరరావు
జిల్లా వైద్య ఆరోగ్యశాఖాధికారి
విశాఖపట్నం

టు

సదరు అభ్యర్థులకు పత్రిక ప్రకటన ద్వారా తెలియ చేయడమైనది.

సదరు నకలు నోటిస్ బోర్డ్ నందు ఈ కార్యాలయంలో ప్రదర్శించడమైనది.

సదరు నకలు జిల్లా పబ్లిక్ రిలేషన్ ఆఫీసర్ (డి. పి.ఆర్. ఓ .)విశాఖపట్నం వారికి ప్రచురునార్గం పంపించడమైనది.

APPLICATION FORM

DM&HO Office , VISAKHAPATNAM

RECRUITMENT FOR THE (on Contract basis)

(

1.	Name of the Candidate (IN BLOCK LETTERS)								Paste recent passport size colour photograph and sign across it	
2.(a)	Name of the Father/Husband:									
(b)	Name of the mother									
3.	Gender (Male/ Female):									
4.	Date of Birth / years									
5.	Social Status (Please Tick):	OC	BC(A)	BC (B)	BC(C)	BC(D)	BC (E)	SC	ST	
6.	Whether Physically Handicapped (please tick) and Percentage	Yes / No				percentage				
		VH / HH / OH								
7.	Whether Ex Service man	Yes / No								

8. DETAILS OF SCHOOL EDUCATION:

CLASS	YEAR OF PASSING	NAME OF THE SCHOOL	VILLAGE, MANDAL AND DISTRICT IN WHICH STUDIED
IV			
V			
VI			
VII			
VIII			
IX			
X			

Study certificates from IVth to Xth should be enclosed otherwise candidate will be treated as non local.

9. EDUCATIONAL QUALIFICATION AND MARKS OBTAINED IN THE QUALIFYING EXAMINATION

Qualifying Examination	College / University	Year of passing	Total marks	Marks obtained	% of Marks obtained

Whether candidate has registered under Rehabilitation Council of India (RCI) Yes / No
If registered , Registration no: _____

10. Details of experience: Contract/outsourcing service as Physiotherapist in any Govt. Institution only to be mentioned [Service done in private institutions/hospitals will not be considered]

Name of the position	Period		Name of the Govt . Hospital where he / she worked	Remarks
	From	To		

11. Address Particulars

Name	
S/o, D/o, C/o	
D.no	
Street	
Village/Town	
District	
Pin Code	
Contact mobile number	
Email ID (if any)	

SELF DECLARATION

I, Smt/Kum/Sri D/o, S/o, W/o..... certify that the above particulars furnished by me are correct to the best of my knowledge. I also agree that, in the event of any of the particulars furnished in my application if found to be incorrect or false at a later date, my candidature will be cancelled, I will be solely held responsible and consenting for appropriate disciplinary action.

Signature: _____

Name of the Candidate: _____

GOVERNMENT OF ANDHRA PRADESH
Contract/Outsourcing/Honorarium Service Certificate
(Certificate to be issued by the Controlling Officer concerned
(DM&HO/DCHS/Principals of GMC/ Superintendents of
GGH/ or any Other Appointing Authority)

This is to certify that,
 S/o,D/o has been working / worked as (name of the post)in PHC / CHC / AH / DH / GGH / or any other AP State Institution aton Contract / Out-Sourcing / Honorarium basis with concurrence of finance department, Government of AP. Details of his / her Contract / Out-Sourcing service as on the date of notification are as follows:

Name of the institution	Urban/ Rural/Tribal (or) Covid-19	Period		Duration	Reasons for break in service (if any)	Charges /allegations /adverse remarks if any
		From	To			

I hereby declare that:

1. His /her services ason Contract/Out-sourcing honorary basis during the above said period are satisfactory.
2. He/she does not have any adverse remarks from his superiors during the period of Contract/Out-sourcing/Honorarium service.
3. He/she is eligible for Contract / Outsourcing Service Weightage as per the rules published in the notification.

Signature& Seal of the Controlling
 Officer (DMHO/DCHS/any other
 competent District Authority who
 appointed the applicant)

Imp. Note: The self attested copy of appointment order must be en-closed along with this service certificate, otherwise weightage for Contract/ Outsourcing/honorary service will not be considered for final merit.

12. Check list:

Note:- The candidate should submit the following Photostat copies with their self Attestation along with application form, failing which the application will be rejected.

Sl.no	Certificate Particulars	Whether enclosed Yes/No
1.	SSC or equivalent examination (for date of Birth)	
2.	Intermediate examination or 10+ 2 examination	
3.	Marks memos for desired qualification	
4.	Copy of the recent caste / community certificate in case of SC / ST / BC (with categorization) issued by the Revenue authorities Tahasildar /MRO concerned. In the absence of proper caste certificate the candidate will be treated as OC candidate, and OC candidate guidelines will be applicable to this type of candidates.	
5.	Study certificates for the years 4th class to 10th class from the school where the candidate studied (Govt./ZP/Municipal/Aided schools)	
6.	In case of private study 4th class to 10th class 7 years residence certificate from the Revenue authorities (Tahasildar / MRO) should be enclosed. In the absence of the above study / residence certificates the candidate will be considered as Non-Local	
7.	Copy of the latest Physically Handicapped certificate issued by the Regional Medical Board or SADAREM in respect of candidates claiming age relaxation under PH Quota	
8.	Relevant certificates in respect of Ex- Service man Quota for claiming age relaxation.	
9.	Work Experience certificate to be submitted for weightage of marks (experience certificate worked as Physiotherapist from any Govt.Institution will only be considered.)	
10.	PLHIV candidates should submit their HIV report	

Station :

Signature of the candidate

Date :

Note:

1. The application submitted without the required certificates and incomplete Applications will be rejected summarily.