### OVERNMENT OF ANDHRA PRADESH <u>A.P VAIDYA VIDHANA PARISHAD ::</u> Srikakulam <u>DISTRICT</u> <u>(NOTIFICATION NO::01/2023, Dated:03.11.2023)</u> <u>Contract / Outsourcing Service Certificate</u> <u>(Certificate to be issued by the Controlling Officer concerned DM&HO/DCHS/any</u> <u>other Appointing Authority)</u>

This			is to	o certi	ify that	t,					S/o,	D/o
		has	been	workin	g as						(nam	e of the
post)	in	PHC/CHC/AH/I	DH/GO	GH/or	any	other	AP	State	Instit	ution	at	
			on	Contr	act /	Out-So	urcing	basis	with	the	Financial	
concurrence of the Government of AP /the details of his/her Contract / Out-Sourcing service as												
on .	02.202	<b>22</b> are as follows:										

Whether there is Charges Urban/Rural/ Reasons forbreak in Working /worked financial /Allegations Tribal (or)Covidservice Period Name of the institution concurrence for /Adverse 19 (if any) appointment (Yes Remarks if From То / No) any

### I hereby declare that:

1.His /her services as ...... on Contract /Out-sourcingbasis during the above said period are satisfactory.

2. He /she does not have any adverse remarks from his superiors during the periodof Contract / Out-sourcing service as Staff Nurse.

3. He /she is eligible for Contract / Out-sourcing Service Weightage as per the rulespublished in the notification.

<u>Station</u>: <u>Date:</u>

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

**Imp.Note:** The attested copy of appointment order must be enclosed along with this service certificate, otherwisethe weightage for Contract / Outsourcing service will not be considered for final merit.

GOVERNMENT OF ANDHRA PRADESH A.P VAIDYA VIDHANA PARISHAD :: Srikakulam_ <u>(Notification No:01/2023, Date: 03.11.2023)</u> Recruitment to the various posts to work on contract basis/Out Sourcing basis in APVVP Hospitals in SRIKAKULAM DISTRICT				
Application for the Post of :	Affix Passport size latest colour photograph			
Application No. (to be filled by the office)				

		1		
1	Name of the Candidate			
2	Gender			
3	Father Name			
4	Date of Birth (DD-MM-YYYY)			
5	Social Status (OC/OC-EWS/SC/ST/BC-A,B,C,D,E)			
6	Whether claiming for service weightage forContract / Outsourcing service (enclose contract / outsourcing service certificate)		Yes /No	
7	Whether Physically Handicapped (VH/HH/OH) (SADAREM Certificate tobe enclosed)			
8	Whether Ex- Servicemen (enclose Service Certificate)		Yes / No	
9	Mobile number of the applicant			
10	DD particulars	DD.No.	Date:	Amount:
10	Address for communication:			

<u>:: 02 ::</u> <u>Marks obtained in the requisite Academic/Technical qualification</u>

Name of the academic /technical education	Total Marks	Secured marks	Year of passing (Month & Year)	Whether registered in respective council (Yes / No)

## <u>Contract / Outsourcing working details if any as on .08.2023:</u>

SI. No	Urban / Contract / Rural / Tribal Outsourcing (or) Covid-19		Period of service		Total period (Years–Months–	Service certificate issued by the competent	
			From	То	Days)	authority enclosed (yes / no)	

# Details of School studies from 4<sup>th</sup> Class to 10<sup>th</sup> Class (for localstatus):

SI. No	Class	Year of passing	Name of the School in which studies	District
1	IV			
2	V			
3	VI			
4	VII			
5	VIII			
6	IX			
7	Х			

## **DECLARATION**

> Signature & mobile number of the applicant

Note: Applications received without proper enclosures will summarily be rejected.

### APPENDIX-I

### CERTIFICATE OF RESIDENCE

(Vide Sub-Clause (ii) of Clause (a) para 7 of the

Presidential Order)It is hereby certified.

(a) That Sri/Srimathi/Kumari

S/o W/o, D/o	appeared for the first time for the matriculation(S.SC)
Examination in	
	(month)year;

- (b) That he/she has not studied in any educational institution during the whole a part of the 4 consecutiveacademic years ending with the academic year in which he/she firstappeared for the a foresaid examination;
- (c) That in the 4 years immediately preceding the commencement of the aforesaidexamination,he/she resided in the following place/places namely,

Village	Taluk	District Period
1.		
2.		
3.		
4.		
Station: Date:	OFFICE SEAL	Officer of Revenue Department not below the rank of Tahsildhar or Deputy Tahsildhar in independent charge of a Sub Taluk

\*Strike off 'whole' ' a part', as the case may be

Date: