GOVERNMENT OFANDHRAPRADESH RECRUITMENT FORMEDICAL OFFICERS POSTS UNDER NATIONAL HEALTH MISSION (URBAN), ERSTWHILE EAST GODAVARIDISTRICT

NotificationNo:04Dated. 10-03-2023.

DISTRICT PROGRAMME MANAGEMENT UNIT, NATIONAL HEALTH MISSION (urban), ERSTWHILE EAST GODAVARI DISTRICT

- 1. Applications are invited from the eligible candidates for filling up the Medical Officers posts under District Programme Management Unit (DPMU), NationalHealthMission(Urban)andvariousHealthfacilitiesintheErstwhile EastGodavariDistrictinofflinemode.
- 2. Details of the Post, Number of vacancies notified, Education qualifications and Experience required shown in Annexure-I.
- 3. **Age**:18-42yearsasondateofissueofthe notification. 5 years' exemption for S.C., S.T., B.C. and EWS Categories, Physical Handicapped for 10 years and Ex-service men for 03 years.
- Candidates shall submit their applications (as per the format given at Annexure -II)along with the following documents handover to the DM&HO Office, Kakinada duly self attested by the Candidate.
 - a. CopyofSSCCertificate(ProofforDateofBirth)
 - b. CopyofIntermediateCertificate.
 - a. CopyofOriginal Degree of Academic/TechnicalEducationalqualifications.mentionedinAnnexure–II.
 - b. CopyofMarksMemo'sforqualificationmentionedin Annexure-II.
 - c. CopyofLatestCasteCertificate (within 1 year)issuedbyMandal Revenue Officers concernedincaseofSC,ST, BC, and EWS otherwise they will be treated as OC.
 - d. If the candidate applied for the P.H. Quota should enclosed latest Disability certificate issued by the Medical Board (SADAREM).

e. Calculationofmarks:

a. 75% Aggregate of marks obtained in all the years in the qualifying examination,

b. Weightage of marks15% experience in Government service including contract /outsourcing service.

- 1. G.O.Ms.No. 163 HM&FW(B1) Dept., dated 12-09-2018,
- 2. G.O.Ms.No. 301 HM&FW(B1) Dept., dated 20-06-2020
- 3. G.O.Ms. No. 07 HM&FW(B2) Dept., dated 06-01-2022 as follows:

For Rural and Urban Service:

i. @ 2.5 Marks per six months in Tribal areas,

ii. @ 2.0 marks per Six months in Rural Areas

iii. @ 1.0 Mark per six months in Urban areas.

For Covid Service:

The Covid staff who are appointed for a period of(6) months but were discontinued not on account of any fault on their part, shall be considered for providing weightage in proportion to days of service rendered by them. However, for calculating same, every completed month shall be taken as a unit for example for a two-month period of service rendered they shall be given 1/3rd of the weightage ie., applicable for a six (6) months' work.

c. Weightage Up to 10 marks @1.0mark per each completed year since they passed the year of qualifying examination &after acquiring requisite qualification.

- 5. Selectionwillbe basedonthe meritcumrosterasperrulesinforce.
- 6. RecruitmentprocesswillbeconductedbytheDistrictSelectionCommittee.
- 7. Recruitmentisoncontractbasis and initially for periodofone year.
- 8. Scheduleforrecruitmentprocess.

Dateof Notification	13-03-2023
Receipt of applications	From 13-03-2023 at 10 AM to 16-03-2023 at 5.PM in all working days.
Publication of Provisional Merit list and receipt of objections	18-03-2023
Publicationof Final meritlist & Selection list	20-03-2023
Issue of appointment orders	22-03-2023

NOTE: The posts notified above shall be increased or decreased as per thedecision takenbytheDistrictSelectionCommittee.

District Medical and Health Officer, Kakinada District, Kakinada

ANNEXURE -I

SLNo	Name of the Post	Total post notifie d	Roster points	Educational qualification
1	Medical Officer	07	OC-G-2 OC(W) EWS-1 OC-G (Sports)-1 SC-G -1 BC-B(W)-1 PH-OH (G)-1	MBBS and internship must be completed on or before 01-03- 2023. Must be registered in APMC with update renewal.

Kakinada District, Kakinada

District Medical and Health Officer,

ANNEXURE-II

NATIONALHEALTHMISSION ERSTWHILE EASTGODAVARIDISTRICT

RECRUITMENT FOR MEDICAL OFFICER POSTS UNDER NHM-2023

APPLICATION FOR THE POST OF (ONCONTRACTBASIS)

(Application should be downloaded and submitted in A4 size paper only)

NotificationNo.03/2023 ApplicationNo...... (forofficeuseonly)

1)Nan	neoftheappli	cant			
(inE	BLOCKletters)				
2)Fath	1er'sName/H	lusband'sName			
3)Ger	nder:		4)Dateofbirth:		
5)Reli	gion:		6)SocialStatus:(SC/ST/BCwithgroup/OC)		
7)Rela	axationofage	ifany:			
8)Whe	ether belong	s to physicallyh	andicapped:		
(Lat	estCertificateis	suedbytheMedicalb	ooard(SADAREM)onlytobeenclosed)		
9)Ifbel	longstoEx-Ser	vicemen, lengthof	serviceinarmedforces		
(Cer	rtificatetothateffeo	cttobeenclosed)			
10)DetailsofEducationqualificationsfromClass-IVtoXClass 11)Local/NonLocal					
Sl.No Class		Year of	NameoftheSchoolstudied	District	
51.110	Class	passing	Nameonneschoolstudied	District	
1	4 th Class				
2	5 th Class				
3	6 th Class				
4	7 th Class				
5	8 th Class				
6	9 th Class				
7	10 th Class				

$11. \ Marks Obtained in Qualifying Exam and Technical Qualifications$

Academic& Technicalqualific ations	Month&year ofpassing	Max. marks/Grade Points	Marks/Gra dePointso btained	% Marks / Grade points
SSC/10 th Class				
Intermediate				
Technical Qualification/ Graduation:				

12. Experience:

T T.	
AP MCI/APNMC/AP Para Medical Board	
Registration Number and valid up to	

13. Address of Communication along with Pin code:

Name	:	
HouseNumber	:	
Village/Town	:	
District	:	
Phone/MobileNo.	:	e-mailaddress:

DECLARATION

Idoherebydeclarethatalltheabovefactsaretrueandcorrect.Ifurtherdeclarethat, if the above particulars are found incorrect, I shall be liable for termination from service withimmediateeffectwithoutassigninganynotice

CHECKLIST

ApplicationNo:

Name of the Applicant:

Name of the Post applied:

1	$Copy\ of marks memoof SSC or equivalent certificate Verified.$	YES	NO
2.	Copy ofIntermediateMarksmemoVerified.	YES	NO
3.	Copy ofmarksmemosofTechnicalQualification	YES	NO
4.	Copy of Apprentice completion certificate in case of Intermediate Vocational Verified.	YES	NO
5.	Copy ofAPMCI/APNMC/APPMBoardregistrationCertificateVe rified.	YES	NO
6.	Copy oflatestCasteCertificate(incaseofSC/ST/BC) Verified.	YES	NO
7.	Copy ofStudyCertificatesfromClass– IVtoXwherethecandidatestudiedVerified.	YES	NO
8.	Copy oflatestPhysicallyhandicappedcertificateSADAREM(ifappli cable) Verified	YES	NO
9.	Copy of certificatessupportingExServiceManQuota (if applicable)Verified.	YES	NO
10	Copy ofCertificateofExperience (IfServicePersons) duly counter signed by the District authority)	YES	NO
11	All the above documents should be attested.	YES	NO
12	Signature of the application & check list.	YES	NO

Receiving Clerk.