

### ZILLA SWASTHYA SAMITI, NABARNGPUR OFFICE OF CDM & PHO-cum-District Mission Director **NABARANGPUR**



Advt. No:

Date:

## CONTRACTUAL APPOINTMENT

Applications are invited from eligible candidates for filling up the following posts under Zilla Swasthya Samiti, Nabarangpur on contractual basis for a period of 11 months subject to renewal as per Society norms basing on the performance and subject to continuance of the Scheme whichever is earlier.

SI No	Name of the post	No of vacancy	Qualification	Consolidated remuneration	Age Limit	
1	Specialist in O&G	1	MD(O&G)	Negotiable	70 years as on advertisement	
2	Specialist in Pediatric	1	MD(Paediatric	Negotiable	(Retired Doctors are encouraged to	
3	Specialist in Dermatology	1	MD(Skin&VD),	Negotiable	apply)	
5	Specialist in Ophthalmology	1	MD (Opthalmogy)	Negotiable		
6	Specialist in Anesthesiology	1	MD(Anesthesiology),	Negotiable		
7	Specialist in Surgery	1	MD(Surgery	Negotiable		
8	Specialist in Medicine	1	MD(Medicine),	Negotiable		
10	Specialist in Pathology	1	MD(Pathology),	Negotiable		
11	Specialist In Radiology	1	MD(Radiology),	Negotiable		

Interested candidates can log on to www.nabarangpur.nic.in & www.devnetjobsindia.org for details of vacancy, eligibility, age and application form. Last date for receipt of the application duly signed by the candidate along with self attested copies of all supportive documents is 15-01-2022 (by 5.00 PM) through speed post /Regd post / courier. The undersigned reserves the right to cancel any or all the applications / positions at any stage of recruitment process without assigning any reason thereof

Sd/- (Dr. Kali Prasad Behera)

Chief Dist. Medical & Public Health Officer, Nabarangpur

### General information and Instructions:

- i. The above positions are purely temporary and co-terminus with the scheme. Canvassing in any form will render the candidate disqualified for the position.
- ii. Details of vacancy, eligibility, age, application forms etc. can be downloaded from the district website <a href="https://www.nabarangpur.nic.in">www.nabarangpur.nic.in</a> & <a href="https://www.nabarangpur.nic.in">www.devnetjobsindia.org</a>.
- iii. Candidates are required to submit the Odisha Council of Medical Registration Bhubaneswar along with the application form.
- iv. Candidates, who are alr eady working in Health Department either on regular or on contractual basis, have to submit **No Objection Certificate** from concerned employer.
- v. Application duly signed by the candidate along with self attested copies of all supportive documents shall however be sent to the "CDM&PHO, Nabarangpur, District: Nabarangpur, Pin:764059, Odisha so as to reach us on or before 15.01.22 (by 5.00 P.M.) through Regd. Post / Speed Post / Courier only and the envelope containing the application should be super scribed clearly name of the post applied for.......
- vi. Incomplete application in any form will be rejected.
- vii. If any candidate is found to have suppressed any material information or furnished false information / documents, his/her case shall not be considered for the post applied for and in case already engaged on the basis of the said information / documents, his / her service shall be terminated from the Society forthwith. Candidates who have been disengaged earlier from the District Health Society on administrative ground such as disobedience / poor performances/ misbehavior/ criminal activity etc. are not eligible to apply.
- viii. This office will not be held responsible for any postal delay. **No application will be entertained after due date 15.01.22 by (5.00 P.M.)**. No personal correspondence / queries will be entertained. All communication will be made through e-mail / District website/Postal.
- ix. Number of vacancies / remuneration as mentioned under this advertisement may vary at the time of actual engagement.
- x. The undersigned reserves the right to cancel any or all the applications / positions at any stage of recruitment process without assigning any reason thereof.

Sd/-(Dr.Kali Prasad Behera)

CDM&PHO, Nabarangpur

# **APPLICATION FORM**

Post Applied for							Pho	otograph		
1. First Name:				Last Name						
2. Date of Birth:			3. Sex:			4. District of Domicile:				
5. Please mention if SC	ST/ O	BC/GEN:								
6. Present Contact Add	ith Telephon	e No:			7. F	Permanent (	Conta	ct Address:		
8. Email Address:		9.Mobile No								
10. Languages spoken/written:										
11. Age as on 01.12.2020										
12. Education: High scho	ool onw	ards, please	list all yo	ur qual	ificatio	ns				
Degree	Institu	ite/Board & Location		Year		Marks			Full/Part Time/ Distance	
(Starting from 10" onwards)	(Starting from 10 <sup>th</sup> onwards)		,			ull ark	Marks Secured	%	Learning	
Any other										
							2		8	
1 3. Employment Record						_				
Total years of experie	nce :									
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### Enclosure:

- 1. Prescribed Filled in application Form
- 2. No Objection Cum Experience Certificate from current employer.
- 3. Any identity proof (Voter ID Card / Aadhar Card etc)
- 4. Photocopy of all academic certificates & Marksheet (Self Attested)
- 5. Photocopy of caste certificate issued by competent authority (Self Attested)
- 6. Recent 2 nos. of Passport Size Photograph. (Self Attested)

Full Signature of the Applicant with date

## **Declaration:**

I do here by declared that the information furnished above are true to the best of my knowledge and belief and that, any stage, it is found that any of the above information is false/incorrect or suppressed by me, my candidature / engagement under District Health Society, Nabarangpur is liable to terminated.

Date:

Place:

Full Signature of the Applicant