

**GOVERNMENT OF TELANGANA
DISTRICT HEALTH SOCIETY, NIRMAL DISTRICT.
NOTIFICATION NO. 244/2018, Date: 06/01/2018.**

RECRUITMENT FOR THE POST OF _____ **ON CONTRACT BASIS**

APPLICATION FORM

Registration No: _____

(For office use only)

1	Name of the Candidate		Paste Photograph here and sign across by Self attestation															
2.a	Name of the Father																	
2.b	Name of the Mother																	
2.c	Name of the Husband (If married)																	
3	Gender (Sex)																	
4	Date of Birth																	
5	Social Status (Please tick)	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 10%; text-align: center;">OC</td> <td style="width: 10%; text-align: center;">BC - A</td> <td style="width: 10%; text-align: center;">BC - B</td> <td style="width: 10%; text-align: center;">BC - C</td> <td style="width: 10%; text-align: center;">BC - D</td> <td style="width: 10%; text-align: center;">BC - E</td> <td style="width: 10%; text-align: center;">SC</td> <td style="width: 10%; text-align: center;">ST</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	OC	BC - A	BC - B	BC - C	BC - D	BC - E	SC	ST								
OC	BC - A	BC - B	BC - C	BC - D	BC - E	SC	ST											
6	Whether physically handicapped (Please tick)	YES <input type="checkbox"/> / NO <input type="checkbox"/>																
6 (a)	If yes please mention category (Please tick)	HH <input type="checkbox"/> / OH <input type="checkbox"/> / VH <input type="checkbox"/>																
7.	Whether Ex-Service man/woman (Please tick)	YES <input type="checkbox"/> / NO <input type="checkbox"/>																

Details of School Education

CLASS	YEAR OF PASSING	DISTRICT IN WHICH STUDIED
IV		
V		
VI		
VII		
VIII		
IX		
X		

District to which candidate belongs as per presidential order: _____

Educational Qualifications:

QUALIFICATION	YEAR OF PASSING	NAME OF THE COLLEGE/ UNIVERSITY

Marks obtained in the Qualifying examination:

Qualifying Examination	Total Marks	Marks Obtained	% of Marks Obtained

ADDRESS PARTICULARS:

Name :
Father/ Husband Name :
House No. :
Street :
Village / Town :
District :
Pin :
Contact Number :

DECLARATION

I, Sri./ Kum./ Smt. , S/o / D/o / W/o
..... certify that 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 being found to be incorrect or false at a later
date my candidature will be cancelled summarily.

Name and Signature
Of the candidate

FOR OFFICE USE ONLY

Date of Receipt of application :

Candidate has submitted all the attested copies of the certificates as per instructions.
All the particulars submitted by the individual are verified with respect to the
certificates and found correct.

Name & Signature
of the clerk

GOVERNMENT OF TELANGANA
DISTRICT HEALTH SOCIETY NIRMAL DISTRICT
NOTIFICATION No: 244/2018, Date: - 06.01.2018.

RECRUITMENT OF CERTAIN POSTS ON CONTRACT

Applications are invited from eligible candidates in the prescribed "Application Form" for recruitment of certain posts on contract basis. The contract is initially for a period of one Year and renewal will be as per the need subject to satisfactory performance. However, every year new contract has to be signed and valid for the period as indicated in the contract.

The Format of Applications may be obtain from official website: nirmal.telangana.gov.in, after filled it may be submitted in person or by Registered post to O/o the Dist. Medical & Health Officer, Nirmal. The date of receiving applications commences from 06/01/2018 at 10.30AM, and ends on 12/01/2018 by 5.00P.M. The Selection committee is not responsible for any postal delays.

1	Staff Nurse	7
2	Lab-Technician	1

I. AGE:

The minimum age is (18) years and the maximum age is (44) years. The minimum and maximum age shall be reckoned as on 01-01-2018 with the following relaxations allowed for reckoning the maximum age limit as per rules:

- i) For S.Cs., S.Ts & BCs 5 (Five) years
- ii) For ex-service men 3 (three) years in addition to the length of service in armed forces.
- iii) Disabled persons 10 (ten) years.

contd. on 2ndpage

II. EDUCATIONAL QUALIFICATION:

Sl. No.	Name of the Service	Educational Qualifications
1	Staff Nurse	A) GNM (OR) B.Sc. (Nursing) B) Registered with AP/ TS Nursing Council
2	Lab-Technician	A) Intermediate B) DMLT / MLT/ B.Sc(LT) from recognized institutions C) Must be registered with the Para Medical Board

III. METHOD OF RECRUITMENT:

1. Recruitment shall be made by the District Selection Committee.

Selections will be done based on the following criteria:

- a. Total Marks are 100 of which 90 marks will be allotted basing on the marks obtained in qualifying examination and 10 marks will be awarded for the age.
- b. Merit list will be prepared based on the marks obtained with above criteria and displayed on website for transparency and also for calling objections.
- c. Selection list will be prepared from the finalized merit list duly following the rule of reservations and presidential order.

IV. RULE OF RESERVATION:

1. Rules of Reservation in respect of Community, Disability, and Ex Service Men/Women shall be strictly observed as per the A.P., State and Subordinate Service Rules-1996, read with the relevant Specific Rules applicable.
2. The Rule of Reservation to Local candidates is applicable as per Presidential order.

contd. on 3rd page

V. HOW TO APPLY:

- a. Application forms along with the instructions may obtained from official **website:** nirmal.telangana.gov.in.
- b. Filled in application form shall be submitted in person or through registered post to O/o the District Medical & Health Officer, Nirmal. Applications which are received after due dates will be summarily rejected. District Selection Committee is not responsible for postal delays.
- c. Self-attested copies of the following certificates should be enclosed along with the Application form should be orderly.

1	S.S.C or Equivalent examination
2	Intermediate or 10 + 2 examination
3	Qualifying Examination Pass Certificate
4	Marks memos of all the years (qualifying examination)
5	Registration Certificates of respective Councils
6	Latest Caste certificate issued by the Tahsildhar / MRO concerned
7	Study certificate for the years from 4th class to 10th class and in case of Private study residence certificate from the Tahsildhar / MRO concerned
8	PH Sadaram certificate in respect of candidates claiming reservation under PH Quota
9	Relevant certificates in respect of candidates claiming Ex-Service Man Quota
10	1 Photograph duly pasted on the application form

Dist. Medical & Health Officer
Member – Convener
Nirmal.

Sd/-
Chairman
Collector & Dist. Magistrate
Nirmal.