



ZILLA SWASTHYA SAMITI, MAYURBHANJ
DISTRICT PROGRAMME MANAGEMENT UNIT
NATIONAL HEALTH MISSION

Advt. No: 05/NHM

Date: 17/08/2022

Walk-In-Interview

Walk-in-Interview will be conducted on dt. 25.08.2022 at 11 AM in the office of the undersigned for engagement in the following post under NUHM, Mayurbhanj with monthly remuneration as noted below as per the norms & conditions under ZSS, Mayurbhanj.

S.N	Name and type of the post	No. of Post	Place of Posting	Age (as on dtd. 01.08.2022)	Remuneration (in Rs.)	Eligibility Criteria & Preference
1	Medical Officer (Contractual)	04	UPHC, Rairangpur & HWC Rairangpur/Karanjia/Baripada	Upto 70 years	Base remuneration Rs.58,344/- PI maximum 25% of the base remuneration	MBBS degree recognised by Medical Council of India & with valid registration from the OCMR. Preference will be given to the Candidates having post qualification experience.
2	Specialist O&G (Part Time)	01	UPHC Tulasichoura	Upto 70 years	Rs. 1500/- per session (Maximum two session per day)	MBBS and PG in O & G and valid registration from OCMR. Preference will be given to the Candidates having post qualification experience.
3	Specialist in Paediatrics (Part Time)	01	UPHC Tulasichoura	Upto 70 years	Rs. 1500/- per session (Maximum two session per day)	MBBS and PG in Paediatrics and valid registration from OCMR. Preference will be given to the Candidates having post qualification experience.
4	Specialist in Medicine (Part Time)	01	UPHC Tulasichoura	Upto 70 years	Rs. 1500/- per session (Maximum two session per day)	MBBS and PG in Medicine and valid registration from OCMR. Preference will be given to the Candidates having post qualification experience.
5	Dentist (Part Time)	02	UPHC Tulasichoura/Murgabadi	Upto 70 years	Rs. 1250/- per session (Maximum two session per day)	Bachelor of Dental Surgery with valid registration from OSDC. Preference will be given to the Candidates having post qualification experience.
6	Physiotherapist (Part Time)	06	UPHC Tulasichoura/Murgabadi/Rairangpur & HWCs Rairangpur/Karanjia/Baripada	Upto 50 years	Rs. 600/- per session (Maximum two session per day)	Bachelor's degree in Physiotherapy (BPT) from recognised Institution. Preference will be given to the Candidates having post qualification experience.

The eligible candidates should come prepared on dt. 25.08.2022 at 11am for Walk-in-Interview with the filled in Application form, 2 passport size photographs, original certificates for verification & self attested photocopies of all the certificates & proof of age. The details of the TOR, application form can be downloaded from the website www.mayurbhanj.nic.in. The undersigned reserves the right to cancel the advertisement without assigning any reason thereof.

Sd/
(Dr. Rupabhanu Mishra)
Chief District Medical & PHO, Mayurbhanj

[Signature]
17/8/22
CDM & PHO-Cum-District Mission Director
Mayurbhanj

TERMS & CONDITIONS FOR MEDICAL OFFICER

1. The position is contractual in nature for a period of 11 months, which can be extended depending upon requirement and satisfactory performance.
2. The applicant should submit the filled in prescribed application form along with self-attested documents as listed below.
3. Candidates have to submit "No Objection Certificate" if serving under any Govt./PSU/Society.
4. Applications incomplete in any respect or with irrelevant information will be rejected.
5. No personal query will be entertained by any means.
6. The application form need to be downloaded from www.mayurbhanj.nic.in and filled in the application form along with the other documents to be submitted.

CANDIDATES ARE REQUIRED TO ATTACH THE FOLLOWING DOCUMENTS ALONG WITH THE APPLICATION FORM.

1. Two recent passport size colour photographs duly pasted at the designated space.
2. Self attested photocopy of proof of Identity (Voter ID card / PAN card / Driving License / Aadhar Card /Passport).
3. No Objection Certificate (if any)
4. Post qualification experience Certificate (if any).
5. Physical fitness certificate.



APPLICATION FORM

NOTICE No.		PHOTOGRAPH				
Name of the Post applied for				Identity Proof No.		
1. Name:						
2. Date of Birth:		4. District of Domicile:	5. Gender: (M/F)			
6. Please mention if GEN/ SC/ ST/ SEBC/PWD/Women)		7. Marital Status (Married /Un Married):				
8. Present Contact Address:		9. Permanent Contact Address:				
10. Email Address:		11. Mobile No.:				
12. Languages spoken/written:						
13. Education: High school onwards, please list all your qualifications						
Exam Passed	Name of the Board / University	Year of Passing	Marks (excluding 4 th optional)			Full/Part Time/ Distance Learning
			Full Mark	Marks Secured	% of marks	

d 8m

14. Post qualification experience:-

Sl. No.	Name of the post	Name of the Organisation served	Address of the organisation	Period of work	
				From	To

Signature of the Applicant

DECLARATION & UNDERTAKING BY THE CANDIDATE

I do hereby declare that the information furnished above are true to the best of my knowledge & belief and if at any stage , it is found any of the above information is false /incorrect or is suppressed by me, my candidature / appointment is liable to be rejected / terminated.

Further, I undertake that I shall produce all original certificates / documents in support of the above information at the time of interview / certificate verification and any relevant certificate required on selection for the posts.

Date:

Place:

Full Signature of the Applicant

