



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

Advt. No: 3139

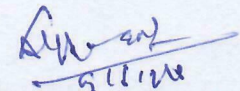
Date- 09/08/26

Walk-In-Interview

Walk-in-Interview will be conducted in the office of the undersigned for engagement in the following post under NHM, Mayurbhanj with monthly remuneration as noted below as per the norms & conditions under ZSS, Mayurbhanj.

S.N	Post & Age (as on dtd. 01.06.2026)	No. of Post	Place of Posting	Remuneration (in Rs.)	Eligibility Criteria & Preference	Date, Time & Venue of Walk-in-Interview
1	NRC Counsellor	01	SDH, Rairangpur	Base remuneration Rs. /- 22,283 (PI maximum 25% of the base remuneration)	Candidate must be a woman with graduation in Home science (Honours or Pass) <u>Selection Procedure:-</u> Written Test Computer Proficiency Test (Word, Excel & Power point), Group Discussion, Personal Interview	22.06.2026
2	Medical Officer (Contractual) (Upto years)	02	UAAM Rairangpur, UAAM Sunamuhin	Base remuneration Rs. 67,122 /- PI maximum 25% of the base remuneration	MBBS degree recognised by Medical Council of India & with valid registration from the OCMR.	22.06.2026
3	Dentist (Part Time)	01	UPHC Debendrapur	Rs. 1500 /- Per Session (Maximum two session per Day & 1 Day in a week)	Bachelor of Dental Surgery with valid registration from OSDC. Preference will be given to the candidates having post qualification experience	22.06.2026
4	Physiotherapist (Part Time)	03	UPHC Debendrapur/Tulasichoura/Rairangpur	Rs. 750 /- Per Session (Maximum two session per Day & 4 Day in a week)	Bachelor Degree in Physiotherapy (BPT) from recognized institution. Preference will be given to the candidates having post qualification experience.	22.06.2026

The participants are required to arrive in the venue for registration by 10.00 AM. The eligible candidates should come prepared 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 Terms & conditions, 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.


(Dr. Dhanurjay Mohanta)

Chief District Medical & PHO, Mayurbhanj

APPLICATION FORM

Adv. No.-		PHOTOGRAPH				
Name of the Post applied for		Identity Proof No.				
1. First Name:		Last Name:				
2. Date of Birth:	4. District of Domicile:	5. Gender:				
6. Please mention if GEN/ SC/ ST/ SEBC/PWD/Women)		7. Marital Status (Married /Un Married):				
8. Present Contact Address:			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	

AM

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 that any of the above information is false /incorrect or 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

