

राष्ट्रीय आरोग्य अभियान
आरोग्य विभाग, जिल्हा परिषद, अमरावती

१५ वे वित्त आयोग अंतर्गत वैद्यकिय अधिकारी (एमबीबीएस) पदे
Walk In Interview द्वारे भरणेबाबत.


१५ वे वित्त आयोग अंतर्गत तालुका स्तरावर आपला दवाखना अंतर्गत वैद्यकिय अधिकारी
(एमबीबीएस) ची खालील ठिकाणी पदे रिक्त आहेत.

(Caste Category – SC-02, ST-01, VJA-01, NTB-01, NTC-01, SBC-01, OBC-03, EWS-2)

Sr. No.	Name of Block	Region (Tribal/on-Tribal)	Place of Working / Name of facility	Qaulification	Salary
1	Anjangaon Surji	Non Tribal	Municipal Council Anjangaon Surji	MBBS With MCIM Registration	Rs. 60,000/-
2	Chandur Railway	Non Tribal	Municipal Council Chandur Railway		
3	Chikhaldara	Tribal	Municipal Council Chikhaldara		
4	Dhamangaon Railway	Non Tribal	Municipal Council Dhamangaon Rly		
5	Morshi	Non Tribal	Municipal Council Morshi		
6	Warud	Non Tribal	Municipal Council Shendurjana Ghat		
7	Warud	Non Tribal	Municipal Council Shendurjana Ghat		
8	Warud	Non Tribal	Municipal Council Warud		
9	Warud	Non Tribal	Municipal Council Warud		
10	Nandagaon Kh.	Non Tribal	Nagar Panchayat Nandgaon Kh.		
11	Dharni	Tribal	Nagar Panchayat Dharni		
12	Bhatkuli	Non Tribal	Nagar Panchayat Bhatkuli		

सदर पदे Walk In Interview द्वारे भरावयाची असल्याने दि. १५/०१/२०२३ रोजी व पदे रिक्त राहिल्यास दर महिन्याच्या दुसऱ्या बुधवारी जिल्हा आरोग्य अधिकारी कार्यालय, जिल्हा परिषद, अमरावती येथे पात्र शैक्षणिक अर्हता धारकांनी मुळकागदपत्रासह उपस्थित राहावे. सदर पदे प्रवर्गानिहाय न मिळाल्यास तात्पुरत्या स्वरूपात खुल्या प्रवर्गामधून भरण्यात येईल.

(सोबत अर्जाचा नमुना जोडलेला आहे.)


जिल्हा आरोग्य अधिकारी
जिल्हा परिषद, अमरावती.

Application No. :
(Office Use only)

15th FINANCE COMMISSION
DISTRICT INTEGRATED & FAMILY WELFARE SOCIETY AMRAVATI
Year 2022-23 (Advertisement No. 2022/ Publish Daily Date - / /2022)
CONTRACTUAL RECRUITMENT - Application Form

PHOTO

Applying Post Name :- _____

(All fields in the forms are mandatory to be filled an Incomplete form submitted will be treated as rejected)

Name:			
Father's/Husband's Name:			
Date of Birth-		Blood Group:	Gender:
DD	MM	YYYY	Marital status :
Age -			
Marital status :		Existing NHM Employee (Yes/ No)	Nationality:
Original Category :		Applying for Category:	Caste Certificate Attached : Yes/No

Address/Contact Details: (Name of the District and Pin code is compulsory)

Address:
State
Pin:
Contact No:
E-Mail Id Correspondence:

Academic /Professional Educational all summary: (Starting form most recent)

From (MM/YY)	TO (MM/YY)	Degree/ Diploma	University/ Institute	Specialization/ Subjects	Final Year Total Marks & Obtained Marks	Final Year Percentage (%)

(OFFICE USE ONLY)

Remark :- _____

Name of Authority:- _____

Signature of Authority:- _____

Work/Experience Summary : (Starting form current/most recent) Experience :

Sr. No	Form (MM/YY)	To (MM/YY)	Organization	Designation	Responsibilities (Min.30 & Max.50 Words)

Total Experience (In Years & Months):

Relevant Experience to the post applied
(In Years & Months):

Computer Proficiency:

Typing Skill : Marathi Typing 30 wpm (Yes/No) :

English Typing 40 wpm (Yes/No) :

Demand Draft No.:

Date:- / /

Bank Name :

Preferences for Place of Posting : 1)

2)

3)

Declaration:

I hereby declare that all statements made in the application are true, Complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found untrue/false/incorrect or I do not satisfy the eligibility criteria my candidature will be cancelled, without assigning any reason thereof. I have read the content of the advertisement and agree to abide by the rules, regulations and procedures for appointment to the post applied for.

Name:

Place:

Date :

Signature :