

**U.T. Administration of Dadra & Nagar Haveli and Daman and Diu,
Directorate of Medical and Health Services,
Community Health Centre Campus, Moti Daman – 396 220.**

No.1/1-5(Apptt.STC)/2020/DMHS(Part-VII)/5096

Dated: 20/05/2021

ADVERTISEMENT

The Directorate of Medical & Health Services invites application from eligible candidate for below mentioned posts to be filled on Short Term contract Basis under Department of Health and Family Welfare, Daman. The last date for submission of application is 05/06/2021.

| Name of Post | No. of Vacancy | Age | Qualification | Consolidated Salary |
|--------------|----------------|------------------------|---|--|
| Physician | 01 | Not Exceeding 45 Years | Essential: MBBS with PG Degree or Diploma in respective subject with 3 years experience in case of PG Degree or 5 years in case of PG Diploma. <i>The candidate having less experience may also attend the interview.</i> | Salary as per experience For Degree : Fresh Rs.1,25,000/- pm Experience more than 5 years Rs. 1,75,000/- For Diploma : Fresh Rs.90,000/- pm Experience more than 5 years Rs. 1,25,000/- |
| Radiologist | 01 | Not Exceeding 45 Years | | |

Eligible and desirous candidates may forward their application in prescribed format (available on website www.daman.nic.in) to **The Director, Medical & Health Services, Directorate of Medical & Health Services, Community Health Centre Campus, Fort Area, Moti Daman - 396 220** with one set of attested photocopy of educational qualification, registration certificate and experience certificate etc.

Person who has been previously terminated from any Government Organisation shall not be considered. All eligible qualification Masters / Degree / Diploma must be from a recognized university / College by Government of India.

Note:

1. Candidates holding Domicile Certificate of DNH and DD will be given preference.
2. No TA/DA will be paid to the candidates for attending the interview.
3. Age relaxation shall be considered for qualified and experienced candidate.
4. The actual number of vacancies may vary as per requirements.
5. The Health Department reserves the right to terminate the selection process without assigning any reason.

Contact No. : 0260 – 2230470



(Dr. V. K. Das)

Director, Medical & Health Services
DNH & DD

**U.T. Administration of Dadra & Nagar Haveli and Daman and Diu,
Directorate of Medical and Health Services,
Community Health Centre Campus, Moti Daman – 396 220**

APPLICATION FORM

| |
|---------------------------------------|
| Affix Latest photograph |
|---------------------------------------|

| | | |
|-----|--|-------------------------------------|
| 1. | Name of post applied for | |
| 2. | Name of candidate (in block letters) | |
| 3. | Father's / Husband Name | |
| 4. | Full Address | |
| 5. | Mobile No. | |
| | Phone No. | |
| 6. | Email address | |
| 7. | Date of Birth (attested copy of valid proof should be enclosed) | |
| | Age (as on 01/03/2021) | Years Months Days |
| 8. | Category (attested copy of valid proof should be enclosed) | SC / ST / OBC / Others |
| 9. | Domicile – (attested copy of Domicile Certificate issued by Mamlatdar, Daman / Diu / DNH should be enclosed) | Daman / Diu / DNH / Other |
| 10. | Language known | |
| 11. | Marital status | |

12. Educational qualification :

| Qualification | Name of college / school | Board / University | Stream / Specialization | Year of passing | Percentage |
|-------------------------------|--------------------------|--------------------|-------------------------|-----------------|------------|
| S.S.C. | | | | | |
| H.S.C. | | | | | |
| MBBS | | | | | |
| Diploma in | | | | | |
| Degree in | | | | | |
| Any other (please specify) | | | | | |

13. Work experience

| Sr. No. | Designation | Name of organization | Period | | | Nature of duties |
|---------|-------------|----------------------|--------|----|------------------|------------------|
| | | | From | To | Total experience | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

14. Details of registration with Medical Council / any other council (Please attached photocopy of relevant document) :

15. Any other relevant information :

Declaration :

I, declare that I fulfill all the conditions of eligibility regarding age limit, educational qualification.

I hereby declare that all the statements made by me in the application form and information sheet are true and complete to the best of my knowledge and belief. I also understand that in case, any of my statements is found untrue during any stage of recruitment and thereafter, I shall be disqualified for the post applied for and I shall be liable for any penal action.

Date :

Place:

Signature of Candidate

Note :

- Unsigned application will be rejected.
- Attested copies of relevant certificate / documents should be attached with application form.