



संघ प्रदेश दादरा नगर हवेली एवं दमण एवं दीव प्रशासन
U. T. Administration of Dadra Nagar Haveli and Daman & Diu,
सदस्य सचिव (शासी निकाय) / O/o. The Member Secretary (Governing Body),
रोगी कल्याण समिति / Rogi Kalyan Samiti,
सरकारी अस्पताल, मरवड, दमण / Government Hospital, Marwad, Daman.
PH.NO.0260-2254266 / E-MAIL ID: ghddmn@gmail.com

No. GHD/DNH&DD/RKS/Advertisement/2024-25/1642

Dated:06.03.2025

ADVERTISEMENT

The Rogi Kalyan Samiti, Government Hospital, Daman invites applications from eligible candidates for below mentioned post to be filled on Short Term Contract Basis under Rogi Kalyan Samiti, Government Hospital, Daman. The application should reach the undersigned on or before 20.03.2025 by 05:00 PM.

Sr. No.	Name of Post	No. of Posts	Age	Education & Other Qualification	Remuneration
UNDER ROGI KALYAN SAMITI					
1.	Ayushman Mitra	01	Not exceeding 30 Years	Essential: 1. HSC from recognized institution. 2. Basic proficiency in computer operations. 3. 6 months course in computer. Desirable: Fluent communication skills in Hindi/English and local Language.	Rs.12,012/- per month

Eligible and desirous candidate may forward their application in prescribed format (download from website www.daman.nic.in) to the office of Medical Superintendent, Government Hospital, Daman, Community Health Centre campus, Moti Daman – 396220, with one set of attested photocopies of educational qualification and experience certificate. The application will be scrutinized by Department Selection Committee. The candidates will be shortlisted based on selection criteria and shortlisted candidates will be called for an interview.

NOTE:

1. Only those candidates who are eligible will be called for an interview.
2. No TA/DA will be paid to the candidates for attending the interview.
3. Application will be summarily rejected if found deviant from prescribed format and required criteria without assigning any reason.
4. The Member Secretary, (GB), Rogi Kalyan Samiti, Government Hospital, Daman reserves the right to terminate the selection process without assigning a reason.
5. Selection committee reserve right to relax the criteria if otherwise found fit for selection of candidates.

(Dr. Manoj Singh)
Member Secretary (GB)
Rogi Kalyan Samiti
Government Hospital Daman.



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APPLICATION FORM

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 20/03/2025)	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	Married <input type="checkbox"/> Unmarried <input type="checkbox"/>

12. Educational Qualification:

Qualification	Name of college / school	Board / University	Stream / Specialization	Year of passing	Percentage
S.S.C.					
H.S.C.					
Any other (please specify)					

13. Work experience:

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

14. Any other relevant information :

Declaration :

I, declare that I fulfil 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.