

**U.T. ADMINISTRATION OF
DADRA & NAGAR HAVELI AND DAMAN & DIU
DIRECTORATE OF EDUCATION
SAMAGRA SHIKSHA**

No. DOE/DNHDD/SS /RECURITMENT/STAFF/2024/594 Date: 21 / 01 / 2026

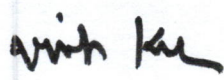
A D V E R T I S E M E N T

The Directorate of Education, UT Administration of Dadra & Nagar Haveli and Daman & Diu invites applications from the eligible candidates to engage Accountant Cum at District level on Short Term Contract (STC) Basis under Samagra Shiksha for Dadra and Nagar Haveli district. The details are as follows: -

Sr.	Post & monthly salary	Essential Qualification/ Eligibility Criteria	Age limit
1	01 Post Accountant Rs. 25000/- Monthly Salary	<p>1) Graduate in Commerce from any recognized University with at least 60% in graduation.</p> <p>2) Certificate of Computer Course, Tally ERP.9 from recognized Institution.</p> <p>3) Minimum 3 years' experience in maintenance of Accounts in Central Govt. / State Govt. / PSU / Govt. Organizations Reputed Companies.</p> <p>Desirable</p> <p>1) Knowledge of GFR 2017 & PFMS.</p> <p>2) Knowledge of GEM (Government E-Market Place).</p> <p>3) Typing speed of 35 w.p.m. (English).</p>	<p>Not exceeding 30 years</p> <p><i>Note: The upper age limit is relaxable as per the Orders/instructions issued by the Central Government from time to time</i></p>

- Application in the prescribed format (enclosed herewith) with copy of relevant documents should be submitted in **hard copy to the office of the Samagra Shiksha, Department of Education, 3rd Floor, Room No. 312, Lekha Bhavan, 66 KV road Amli-Silvassa-396230 for post pertaining to Dadra & Nagar Haveli District on or before 05 / 02 / 2026 by 05:00pm.**

This is issued with the approval of the competent authority.


**State Project Director
Samagra Shiksha
UT of DNH&DD**

**U.T. ADMINISTRATION OF
DADRA & NAGAR HAVELI AND DAMAN & DIU
(DIRECTORATE OF EDUCATION)
SAMAGRA SHIKSHA**

Application for the Post (Tick ✓ as per eligibility).

1. Accountant

Paste recent self-
attested passport
size Photograph

1.	Applicant's Name				
2.	Father's/Husband's Name				
3.	Residential Address	Pin Code- _____			
4.	Mobile No.				
5.	Email Id				
6.	Date of Birth	___/___/___, in word _____			
7.	Age as on last date of application	Years	Months	Days	
(Tick ✓ in the below boxes as applicable)					
8.	Gender	Male	Female		
9.	Caste category (Whether SC/ST/OBC)	SC	ST	OBC	Un-reserved
10.	Whether belongs to Physically Handicapped category or other Special Category	Yes	No		
11.	Marital Status	Married	Unmarried		
12.	Domicile of DNH/Daman/Diu	Yes	No		
13.	Education Qualification				
Sr. No.	Qualification	Board/ University	Year of Passing	Mark Obtained out of Total Marks	Percentage
1.				/	
2.				/	
3.				/	
4.				/	
5.				/	
6.				/	
7.				/	

14.	Experience :					
Sr. No.	Name of the Organization/Department	Post held	Duration of Service		Years of service	Brief of service
			From	To		
1.						
2.						
3.						
4.						
5.						
6.						
15.	Any other achievements with respect to the applied post:					

Note: - List of supporting documents (Tick \checkmark in the below boxes as applicable)

- Leaving Certificate SSC Marksheet HSC Marksheet
 Graduation Marksheet Graduation Degree Certificate
 Post-Graduation Marksheet Post-Graduation Degree Certificate
 Professional qualification Marksheet Degree/Diploma Certificate
 Caste Certificate, OBC Non-Creamy Layer Certificate (if applicable)
 Experience Certificate, Disability Certificate (if applicable)

SELF DECLARATION

I, hereby declare that, I fulfill all the conditions for the engagement to the applied post. I am also aware that the post for which I have applied is contractual in nature and does not have any right for regularization in future in any case.

I declare that, all statements made in this application form are true, complete and correct to the best of my knowledge and belief. I understand that, in the event of any information being found suppressed/false or incorrect or ineligibility being detected before or after the examination, my candidature/engagement is liable to be cancelled.

Date :- / /2026

Place :-

SIGNATURE OF THE CANDIDATE

FOR OFFICE USE ONLY

The candidate is eligible/not eligible.

Application No. : _____

Checked By: _____

Remarks:-