



OFFICE OF THE CDM&PHO-CUM- DISTRICT MISSION DIRECTOR, NHM, JHARSUGUDA

District Programme Management Unit (DPMU),NHM, Dist Headquarter Hospital,
At: Malimunda, Post: OSAP Lane, Dist: Jharsuguda – PIN: 768204 (Odisha)

Phone : 06645- 273107, e-mail dpmujha@nic.in

Letter No. 4803 / NHM/HR-742 /21

Date: 24.5.2021

To

The Editor, “ **The PRAMEYA**”
(Through the Local Corrospondences, Jharsuguda)

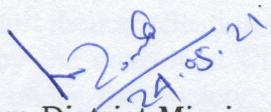
The Editor, “ **The Pragatibadi**”
(Through the Local Corrospondences, Jharsuguda)

Sub: Publication of the advertisement.

Sir,

Please find here with a specimen copy of the advertisement for Publication of the same in your daily news paper (One time) consuming minimum space and submit the bill as per I&PR rate along with a copy of the supplement to the undersigned within 7 days for payment.

Yours faithfully,


CDM&PHO cum District Mission Director,
NHM, Jharsuguda

Memo No. 4804 /NHM/ 21

Date: 24.05.2021

1. Copy to the DIO, NIC, Jharsuguda for information with a request to publish the same along with the enclosures (enclosed herewith) in the district website for information of the candidates.
2. Copy to the Head Clerk, O/o the CDM&PHO, Jharsuguda for information and necessary action.
3. Copy to the DAM, NHM, Jharsuguda for information and necessary action.


CDM&PHO cum District Mission Director,
NHM, Jharsuguda



ZILLA SWASTHYA SAMITI (ZSS), Jharsuguda
Office of the CDM&PHO-cum- District Mission Director, NHM, Jharsuguda

Advt. No. 4805 / NHM/HR-742/21

Date: 24 / 05 / 2021

NOTICE

The contractual employees of NHM already engaged in the following posts under OSH&FWS in other districts and desiring to be posted in Jharsuguda district are hereby requested to submit their application form in e-mail dpmunhmjha@gmail.com by 5.00 PM of 31.05.2021.

Sl. No.	Name of the Post	Vacancy
1	Medical Officer (SNCU)	1
2	MO AYUSH CHC/PHC - Homeopathy	4
3	AYUSH Ayurvedic-RBSK-Female	1
4	Finance cum logistics consultant (NPCDCS)	1
5	Logistic Manager (Logistic, PROMIS & Immunization)	1
6	RMNCH/FP Counsellor	1
7	Optometrist (DEIC)	1
8	Psychiatric Social worker under NMHP	1
9	Pharmacist - RBSK	1
10	TBHV (RNTCP)	1
11	Dental Technician (DEIC)	1
12	ANM/Staff Nurse (RBSK)	2
13	Psychiatric Nurse (NMHP)	1
14	Community Nurse (NMHP)	1
15	Case Registry Assistant Under (NMHP)	1

Interested in-house candidates of NHM are requested to submit their application form in the prescribed format with NOC and experience certificate issued by the concerned CDM&PHO. Selection shall be made on the highest length of incumbency under the Society, as per the reservation category applicable, if any. The application format & other details can be obtained from the district website: jharsuguda.nic.in . Applications received other than the e-mail will not be considered. Vacancies shown above are provisional and subject to change during the time of selection / appointment. Incomplete application in any form is liable for rejection. No personal query will be entertained. The undersigned reserves the right to accept/reject any application and modify / cancel the advertisement without assigning any reason thereof.

Sd/- Dr. Lalmohan Routray,
CDM&PHO, cum District Mission Director, Jharsuguda



**APPLICATION FORM FOR IN-HOUSE CONTRACTUAL EMPLOYEES OF NHM
WORKING IN THE SAME POST UNDER THE OSH&FWS SOCIETY IN OTHER
DISTRICT & INTERESTED TO BE POSTED IN JHARSUGUDA DISTRICT AGAINST
VACANT POST**

1. Name of the Positions applied for
2. Name of the Applicant:.....
3. Father's Name.....
4. Date of Birth:.....
5. Category (UR/SEBC/ST/SC):.....
6. Present Address.....
.....
7. Permanent Address
8. Telephone/Mobile No.....
9. E-mail id (If any).....
10. Present Place of Posting:.....
11. Date of Joining in the same Post.....
12. Names of previous station in such Post(mentioned the name of the district)
 - a. Place of Posting.....From.....to.....
 - b. Place of Posting.....From.....to.....
13. Last uninterrupted contractual service in the same post under Society.
 - c. Place of Posting.....From.....to.....
 - d. Place of Posting.....From.....to.....

**Affix Recent
Pass Port
size
Colour
Photography**

ENCLOSURE:

- i. NOC with continuation certificate and Experience certificate if any in same post under NHM issued by concerned CDM&PHO.
- ii. Caste certificate issued by competent authority.

DECLARATION

I do hereby declare that the information furnished above are true to the best of my knowledge & belief. If in any stage, it is found that any of the above information is false/ incorrect or any information suppressed by me, my candidature/ appointment under Odisha State Health & Family Welfare Society (OSH&FWS), Odisha is liable to be rejected/ terminated at any point of time.

Place: _____
Date _____

(Full Signature of the candidate)

[Handwritten Signature]