Dated: 04/02/2013 Administration of Daman & Diu, Directorate of Medical & Health Services, Primary Health Centre, Daman 396 220.

ADVERTISEMENT

Application are invited for filling up the following post in the Directorate of Medical & Health Services, U. T Administration of Daman & Diu from the eligible candidates who possess the required Educational Qualification and experience as shown below:-

Sr.	Name of the Post	No of	Educational Qualification	Age limit
No.	and Pay Band + GP	post		
1.	Filaria Inspector,	01 (UR)	Essential:-	Age: Not exceeding 30 years (Relaxable for
	PB-1 Rs. 5200-		1.H.S.S.C passed with	Govt. Servant upto 5 years)
	20200 (GP – 2400)		Science subject.	
			2.Completion of Multi	
			Purpose Health Worker	
			(Male) course from	
			recognized Institutions.	
			Desirable:- Knowledge of local	
			language.	

The candidates should submit applications in prescribed Format with latest photograph attested by a Gazetted Officer giving full details regarding Educational and other Qualification, Date of Birth, Experience etc. accompanied with attested copies of each certificate so as to reach the office of the Director, Directorate of Medical & Health Services, Primary Health Centre, Moti Daman 396 220 on or before 26/02/2013 (The application can also be download from www.daman.nic.in). The applications received with requisite documents as stated above shall only be taken into consideration and if received within the stipulated time. No correspondence will be entertained as regards incomplete/time barred applications. The candidates are

required Domicile Certificate of U.T. of Daman & Diu issued by the Mamlatdar, Daman / Diu.(Application form											
attached).	ed).										
			ctor,								
		Health Services,									
			Diu, Daman								
APPLICATION FOR THE POST OF Filaria Inspector											
1. Applicant Name(in	Affix your										
2. Father's Name (in B	photograph										
3. Residential Address	1 0 1										
3. Residential Address : here											
5. Gender											
6. Nationality:-											
7. Age as on normal closing date											
8. Whether SC/ST/OBC/PH/Ex-Serviceman:-											
9. Educational Qualification:-											
Name of the Exam	Board /	Year o	f No. of	Percentage	Class (Distinction, 1 st class,						
	University	Passing	Attempt		2 nd class Pass Class etc).						
			1 4001118	12000000							
10. Experience if any					1						
Name of Organization	Designation	Nature of duty		Period of Service							
				From To							
			_								
11 Address Write your complete communication address including your page in English conite letter with blue											
11. Address: Write your complete communication address including your name in English capital letter with blue or black Ball Pen.											
Name :	А	Address:		Mobile No.							
Tunie .	radioss.			Modile 140.							

12. Declaration:

- I declare that I fulfill all the conditions of eligibility regarding age limit, Educational Qualification, 1. Experience etc.
- I declare that all statements made in this application form are true and 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/appointment is liable

(Signature of the Candidate) Note: Application without Attested Photo Copy of Educational/Birth/Experience/ Domicile certificates shall be rejected summarily. Unsigned application will be rejected.