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

<table>
<thead>
<tr>
<th>Sr. No</th>
<th>Name of the Post and Pay Band + GP</th>
<th>No of post</th>
<th>Educational Qualification</th>
<th>Age limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Anesthetist Assistant 5200-20200 with GP of 2800 in PB-1</td>
<td>01 (Gen.)</td>
<td>Essential : 1) Graduate in Science subject (B.Sc.) 2) Diploma in operation Theatre Technician course. Desirable : Knowledge of speaking, reading and writing of local language i.e. Gujarati.</td>
<td>Not exceeding 30 years (Relaxable for Govt. Servant upto 5 years) In accordance with orders and instructions by the Central Government.</td>
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<tr>
<td>2.</td>
<td>Basic Health Worker/ Health Worker (Male) 5200-20200 with GP of 1900 in PB-2</td>
<td>05 (UR) 01 (OBC)</td>
<td>Essential:- 1) H.S.S.C. passed or equivalent 2) Completion of Multi Purpose Health Worker (Male) course from recognized institutions. Desirable:- Knowledge of local language.</td>
<td>Not exceeding 30 years (Relaxable for Govt. Servant upto 5 years).</td>
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<tr>
<td>3.</td>
<td>Pharmacist Rs. 5200-20200 with Grade Pay of Rs. 2800 in PB-1</td>
<td>01 (ST)</td>
<td>Essential : 1) Diploma in Pharmacy from a recognized Institution. 2) Registration from Pharmacy Council of any State. 3) One year experience in dispensing the drugs. Desirable : Knowledge of local language.</td>
<td>- Do -</td>
</tr>
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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 15/07/2013. 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. Applicant must attach experience Certificate without which application will be rejected. **The candidates are required Domicile Certificate of U.T. of Daman & Diu issued by the Mamlatdar, Daman / Diu (Application form attached).**

( Dr. K. Y. Sultan)
Director, Medical & Health Services,
Daman & Diu, Daman

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**APPLICATION FOR THE POST OF Anesthetist Asstt./BHW/Pharmacist ________________________________**

1. Applicant Name(in English in Block Letter):- ________________________________
2. Father’s Name (in Block Letter):- _________________________________________
3. Residential Address :- ___________________________________________________
4. Date of Birth:- ___________________________________________________________
5. Gender ________________________________________________________________
6. Nationality: _____________________________________________________________
7. Age as on normal closing date ______________________________________________
8. Whether SC/ST/OBC/PH/Ex-Serviceman:-------------------
9. Educational Qualification:-------------------

<table>
<thead>
<tr>
<th>Name of the Exam</th>
<th>Board / University</th>
<th>Year of Passing</th>
<th>No. of Attempt</th>
<th>Percentage</th>
<th>Class (Distinction, 1st class, 2nd class Pass Class etc).</th>
</tr>
</thead>
</table>

10. Experience if any

<table>
<thead>
<tr>
<th>Name of Organization</th>
<th>Designation</th>
<th>Nature of duty</th>
<th>Period of Service</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>From To</td>
</tr>
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</table>

11. Address: Write your complete communication address including your name in English capital letter with blue or black Ball Pen.
Name : __________________________
Address : _________________________
Mobile No. ________________________

12. Declaration:
   1. I declare that I fulfill all the conditions of eligibility regarding age limit, Educational Qualification, Experience etc.
   2. 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 inelegibility being detected before or after the examination my candidature/appointment is liable to be cancelled.

Dated : ________________________
(Signature of the Candidate)

Note: Application without Attested Photo Copy of Educational/Birth/Experience certificate shall be rejected summarily. Unsigned application will be rejected.