ADVERTISEMENT

Application is invited for filling up two posts of Para Medical Worker (PMW) on regular basis 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:-

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Name of the Post and Pay Band + GP</th>
<th>No of posts</th>
<th>Educational and Other Qualification</th>
<th>Age limit</th>
<th>Reservation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Para Medical Worker (PMW) PB-1 Rs. 5200-20200 with Grade pay Rs. 2400/-</td>
<td>02 posts</td>
<td>Essential:- (1) H.S.S.C. passed. (2) Completion of Multi Purpose Health Worker (Male) course from recognised institutions. Desirable:- Knowledge of Local language.</td>
<td>Not exceeding 30 years (Relaxable for Govt. Servant up to 5 years)</td>
<td>1- UR 1 - ST</td>
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The candidates should submit applications in prescribed Format with latest Self Attested photograph giving full details regarding Educational and other Qualification, Date of Birth, Experience etc. accompanied with self 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 25/04/2016 from the date of publication of advertisement. (The applications form can also be downloaded from the website www.daman.nic.in).

Any Indian citizen can apply for the post. However applicant having domicile of Daman & Diu shall be given weightage in accordance with O.M. No.1-I-87-CS/PF/1759 dated 29/09/2015 subject to him/her producing domicile certificate issued by the Mamlatdar, Daman / Diu. 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.

( Dr. K. Y. Sultan ) Director, M & H Services, Daman
APPLICATION FOR THE POST OF : PARA MEDICAL WORKER (PMW) 

( FOR UR AND ST CATEGORY )

ADMINISTRATION OF DAMAN & DIU, DIRECTRATE OF MEDICAL & HEALTH SERVICES, PRIMARY HEALTH SERVICES, MOTI DAMAN

1. Applicant's Name (in Block Letter) : 
2. Father's Name (in Block Letter) : 
3. Residential Address : 
4. Email ID : Phone No.: 
5. Date of Birth (DD/MM/YYYY) : 
6. Gender (Male / Female) : 
7. Whether SC/ST/OBC/PH : (Yes/No) 
8. Domicile of Daman / Diu : 

9. Educational Qualification

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Examination Passed</th>
<th>Board / University</th>
<th>Year of Passing</th>
<th>Percentage</th>
</tr>
</thead>
</table>

10. (a) Information / documents regarding Educational and other Qualifications: (✓ as appropriate)

I. Essential:
(i) H.S.S.C. passed. 
(ii) Completion of Multi Purpose Health Worker course from recognised institutions.

II. Desirable:
(i) Knowledge of Local language.

11. Experience, if any

<table>
<thead>
<tr>
<th>Name of Organisation</th>
<th>Designation</th>
<th>Nature of Duty</th>
<th>Period of Service</th>
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<td></td>
<td></td>
<td>From</td>
</tr>
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</table>

Declaration:  
I, declare that I fulfill all the conditions of eligibility regarding age limit and Education Qualification, Experience etc., for the post of ____________________________

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/appointment is liable to be cancelled.

Dated: (Signature of Candidate)  

Unsigned application will be rejected.

Note: Attach self attested copy of Birth/Education/Experience Certificate/Caste Certificate (if relevant), Domicile Certificate (if of Daman/Diu), Physically Handicapped Certificate (if relevant) failing which the application will be summarily rejected.