Rogi Kalyan Samiti, Government Hospital, Daman invites application from eligible candidates for below mentioned posts to be filled on Short Term Contract Basis under Rogi Kalyan Samiti, Government Hospital, Daman. The application should reach the undersigned on or before 17.06.2019.

<table>
<thead>
<tr>
<th>Sr. No</th>
<th>Name of Post</th>
<th>No. of Vacancy</th>
<th>Age</th>
<th>Qualification</th>
<th>Consolidated Salary</th>
</tr>
</thead>
</table>
| 1      | Hospital Administrator / Manager | 01             | Not exceeding 35 years | 1. MBBS/Dental/AYUSH/Nursing/Life Science graduate with Post Graduate in Hospital Administration Health Management (full time 2 years) with one year experience in public Health Hospital administration.  
2. Candidate with experience in Healthcare Quality/ formal quality of a system would be preferred.  
3. Fluency in English, Computer literacy, knowledge of government legislations and policies are essential.  
4. Candidate must have good communication skills both written and verbal. | Rs.50,000/- per month                |
| 2      | Neurosurgeon                  | 01             | Not exceeding 35 years | 1. MBBS  
2. MS General Surgery  
3. MCH Neurosurgeon | Rs.1,50,000/- per month            |
| 3      | Maxillofacial Surgeon         | 01             | Not exceeding 35 years | 1. MDS in Oral & maxillofacial Surgery | Rs.2,500/- per day per visit and emergency Rs.2,500/- per visit. |
| 4      | Laboratory Technician         | 01             | Not exceeding 30 years | Essential: 1. H.S.C. passed with Science Subject  
2. Successful completion of Diploma in Medical Lab Technician course from recognized institution. | Rs.15,600/- per month                |

Eligible and deserving candidates may forward their application in prescribed format (download form website www.daman.nic.in) to the office of the Medical Superintendent, Government Hospital, Daman – 396210 with one set of attested photocopies of educational qualification and experience certificate. The application will be scrutinized by Department Selection Committee. The
Candidates will be shortlisted based on selection criteria. Shortlisted candidates will be called for interview.

NOTE:

1. Candidates holding Domicile Certificate of Daman & Diu will be given preference.
2. Only those candidates who are eligible will be contacted for interview.
3. No TA/ DA will be paid to the candidates for attending the interview.
4. Application will be summarily rejected if found deviant from prescribed format and required criteria without assigning any reason.
5. Member Secretary, Rogi Kalyan Saniti, Government Hospital, Daman reserves the right to terminate the selection process without assigning a reason.

SHAILESH ARLEKAR
Member Secretary, RKS
Government Hospital, Daman
APPLICATION FORM
ROGI KALYAN SAMITI,
GOVERNMENT HOSPITAL, DAMAN

1. Name of post applied for: ________________________________

2. Name of candidate (in Block letters): ________________________________

3. Father's/Husband Name: 

4. Full Address: _____________________________________________________

5. Phone No. _____________________ Mobile No. _____________________

6. E-Mail address: ___________________________________________________

7. Date of birth __________ (attested copy of valid Proof should be enclosed)

8. Age (as on 17.06.2019) Year __________ Month __________ Days __________

9. Category: ST/SC/OBC (attested copy of valid proof should be enclosed)

10. Domicile : Yes / No. (Attested copy of Domicile Certificate is issued by Mamladhar, Dam & Diu should be enclosed).

11. Language Known: _______________________________________________

12. Marital Status: Married [ ] Unmarried [ ]

13. Education Qualification:

<table>
<thead>
<tr>
<th>Academic</th>
<th>Name of School/ University</th>
<th>Board / University</th>
<th>Stream/ Special Subject</th>
<th>Year of Passing</th>
<th>Percentage</th>
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</thead>
<tbody>
<tr>
<td>S. S. C.</td>
<td>__________________________</td>
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<tr>
<td>H. S. C.</td>
<td>__________________________</td>
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<tr>
<td>Diploma in</td>
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<tr>
<td>Graduation in</td>
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<td>Any other</td>
<td>Please specify</td>
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14. Work Experience:

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Designation</th>
<th>Organization</th>
<th>Duration</th>
<th>Nature of Duties</th>
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</table>

I hereby declare that all the statements made by me in the application form and information sheet are true and complete to the best of my knowledge and belief. I also undersigned that in case any of my statements is found untrue during any stage of recruitment and thereafter, I shall be disqualified for the post applied for and I shall be liable for any penal action.

Date:
Place:

Signature of Candidate

- Attested Copies of Relevant Certificate / Documents should be attached along with application form.
- Incomplete or Unsigned Application will be rejected.