

**OFFICE OF THE DISTRICT MEDICAL AND HEALTH OFFICER :: VIZIANAGARAM**

**RBSK Section**

Date: 23-07-2025

**Notification (3<sup>rd</sup> time)**

The following posts are still vacant as no eligible candidate applied for the posts **erstwhile Vizianagaram District (Vizianagaram and Parvathipuram DEICs)** as per the roster points, during the notification published on 16-12-2024.

As per the instructions of the Chairman, District Selection Committee, Vizianagaram eligible candidates are requested again to apply for the following posts as per the roster point.

Starting Date of Receiving of Applications	:	23-07-2025
Ending Date of Receiving Applications	:	02-08-2025
Provisional List display	:	07-08-2025
Grievances Period	:	08-08-2025 to 14-08-2025
Final List Display	:	18-08-2025 (on or after)

Sl No	Name of the Programme	Name of the Post Vacant	No. of Posts vacant	Roster Point (After confirmation by Establishment Section)
1	RBSK	Audiologist cum speech therapist	1	2 - SC (W)
2	RBSK	Dental Technician	2	1 – OC(W) & 2 - SC(W)
3	RBSK	Lab Technician	1	13-OC-Ex SM

**Mode of Selection** : 1) Academic Merit under prescribed reservation quota  
2) Age as per the Govt. Norms  
3) Local / Non-Local as per the Govt. norms and Final decision by Selection Committee.  
4) 75% academic merit, 15% for previous experience (Govt. / Govt. Funded), 10% for educational / professional seniority.

Sd/-  
Programme Officer,  
NCD / RBSK – RKSK  
Vizianagaram.

Sd/-  
District Medical & Health Officer,  
Vizianagaram

**RE – NOTIFICATION (3<sup>rd</sup> time)**

**Rc.No.02/RBSK-RKSK, Dated -07-2025**

**(O/o District Medical & Health Office , Vizianagaram)**

**HEALTH & FAMILY WELFARE DEPARTMENT**

FRESH NOTIFICATION for the recruitment drive for the Different posts in NHM Scheme purely on temporary and Contract Basis for a Period of One Year working under the DMHO, Vizianagaram Control .

**APPLICATION FORM**

REGISTRATIN NO:

(TO BE FILLED BY THE OFFICE)

--

POST FOR WHICH APPLICATION MADE

--

1)Name of the applicant (in BLOCK letters)												
2)Aadhar No of the candidate (Mandatory)												
3)Father's Name/ Husband's Name												
4)Residential Address:												
5)Candidates personal mobile no.(Mandatory) <b>*All communications will be through mobile only</b>												
3)Sex:(Male/Female)	4)Date of birth :											
5)Religion:	6)Social Status : (SC/ST/BC -(with A,B,C,D)/ OC)											
7)Relaxation of age, if any: (Please specify the relaxation of age and in which aspect)												
8)Whether belongs to physically handicapped (latest Certificate issued by the SADARAM only valid)										(Yes/No)		
9)If belongs to Ex-Service men, length of service in armed force (Only Candidate must be Ex-servicemen/women)										(Yes/No)		
10)Whether the individual is having sports quota and having Eligibility certificate issued by the Sports Development Authority										(Yes/No)		
11) If belongs to Economically Weaker Sections(EWS) (Candidate must submit certificate obtained from Tahasildhar)										(Yes/No)		
<b>**Study and conduct certificate details from Class- IV to X Class**</b>												
Sl. No.	Class	Year of Study	Name &Address of the School, where studied								District	
1	4 <sup>th</sup> Class											
2	5 <sup>th</sup> Class											
3	6 <sup>th</sup> Class											
4	7 <sup>th</sup> Class											
5	8 <sup>th</sup> Class											
6	9 <sup>th</sup> Class											
7	10 <sup>th</sup> Class											

Educational Qualification:					
Month & year of passing	Max. marks/ Grade/Points	Marks/Grade/Points obtained	Percentage of Marks Grade/Points/		
Name of the council/board in which registered		Registration No:	Year of Registration & Renewal	Registration Valid upto	

**Contract/Outsourcing/ Covid-19 Service in Government if any:**

(Service certificate issued by the appointing authority of concerned Government department is only valid and Appointed Order )

Name of the Scheme, where the applicant is working / was worked in the Government service	
Name of the department in which worked	
Whether on contract(or)out sourcing basis	
If, on outsourcing, indicate the Name & Address of the Out sourcing agency	
Appointment orders issued by whom	
Appointment orders Proceedings Rc.No.	
Place & Address, where the applicant has worked	
Indicate the place of working is Tribal, Rural(or) Urban	
Period of working (indicate DD/MM/YYYY)	From _____ To _____
No. of completed years in Government service	

Phone/Mobile No. :

E-mail address :

GOVERNMENT OF ANDHRA PRADESH

Contract/Outsourcing/Honorarium Service Certificate

(Certificate to be issued by the Controlling Officer concerned  
(DM&HO/DCHS/Principals of GMC/ Superintendents of GGH/ or any  
Other Appointing Authority)

This is to certify that, .....  
S/o, D/o ..... has been working / worked as (name of the  
post) in PHC / CHC / AH / DH / GGH / or any other AP State Institution at  
.....on Contract / Out-Sourcing / Honorarium basis  
with concurrence of finance department, Government of AP. Details of his / her Contract /  
Out-Sourcing service as on the date of notification are as follows:

Name of the institution	Urban/ Rural/Tribal (or) Covid-19	Period		Duration	Reasons for break in service (if any)	Charges /allegations /adverse remarks if any
		From	To			

I hereby declare that:

1. His /her services as .....on Contract/Out-sourcing honorary basis during the above said period are satisfactory.
2. He/she does not have any adverse remarks from his superiors during the period of Contract/Out-sourcing/Honorarium service.
3. He/she is eligible for Contract / Outsourcing Service Weightage as per the rules published in the notification.

Signature& Seal of the Controlling Officer  
(DMHO/DCHS/any other competent  
District Authority who appointed the  
applicant)

Imp. Note: The self attested copy of appointment order must be en-closed along with this service certificate, otherwise weightage for Contract/ Outsourcing/honorary service will not be considered for final merit

APPENDIX-I

CERTIFICATE OF RESIDENCE

(Vide Sub-Clause (ii) of Clause (a) para 7 of the Presidential order) It is hereby certified,

(a) That Sri/Smt/Kumari\_\_\_\_\_

S/o, W/o, D/o\_\_\_\_\_appeared for the first time for the matriculation  
(S.SC) Examination in (month)\_\_\_\_year;

(b) That he/she has not studied in any educational institution during the whole or a part of the 4 consecutive academic years ending with the academic year in which he/she first appeared for the aforesaid examination;

(c) That in the 4 years immediately preceding the commencement of the aforesaid examination, he/she resided in the following place/places namely,

Village	Taluk	District	Period
---------	-------	----------	--------

1.

2.

3.

4.

5.

6.

7.

Station:

OFFICE SEAL

Date:

Officer of Revenue Department not  
Below the rank of Tahsildhar or  
Deputy Tahsildhar in independent  
Charge Of a Sub Taluk

### **DECLARATION**

I, \_\_\_\_\_, S/o/ D/o / W/o.

\_\_\_\_\_, resident of House No:, \_\_\_\_\_ -

Address : \_\_\_\_\_, do here

by declare that, all the particulars furnished in my application are true and correct. I have read the entire notification and abide to the guidelines. I, further declare that, if the above particulars are found incorrect, I shall be liable for termination from service with immediate effect without any notice.

**Signature of the applicant**

**::CHECK LIST ::**

<b>Sl. No.</b>	<b>Enclosures</b>	<b>Status</b>
1	Filled-in application form with latest Passport size photo affixed.	Yes/No
2	Gazetted-attested copy of marks memo of SSC(or)equivalent certificate	Yes/No
3	Gazetted -attested copies of marks memos of all the years of qualifying Examination	Yes/No
4	Gazetted -attested copy of Provisional/ Permanent certificate of qualification	Yes/No
5	Gazetted-attested copy of permanent registration certificate of the Council /Board with necessary renewals	Yes/No
6	Gazetted –attested copy of latest caste certificate (in case of SC/ST/BC)	Yes/No
7	Gazetted –attested copies of study certificates from Class–IVto X where the candidate studied. In case of private study of SSC or its equivalent residence certificate issued by the Tahasildhar for the previous even years in the prescribed proforma.	Yes/No
8	Gazetted – attested copy of latest physically handicapped certificate issued by SADARAM /Ex-Servicemen(if applicable)	Yes/No
9	Gazetted-attested copy of sports certificate along with eligibility certificate issued by the sports development authority in the prescribed format(if applicable)	Yes/No
10	Gzatted-attested copy of EWS certificate issued by the Tahasildar (if applicable)	Yes/No
11	Gazetted-attested copy of service certificate of the candidate duly countersigned by the DM&HO/DCHS/Other authority competent By whom the individual was been appointed. as well as produce the Appointment order	Yes/No

**Note: All the above Certificates Must be Attested by the Gazetted Officer**

**Signature of the applicant**