

NOTIFICATION

The applications are invited in the format for BIO- DATA to the following posts of Dist TB Control society, Vizianagaram on contract basis initially for a period of one year and the contract may be extended subject to satisfactory performance.

S.No.	Category post	No. of posts	Roster points & Posts	Monthly remuneration in Rs.	Essential qualification	Preferential qualification
1	Senior Treatment Supervisor (STS)	1	11 OC -1	33,975/-	1. Bachelors Degree or Recognized Sanitary Inspectors Cour. 2. Certificate course in computer operation (minimum two months). 3. Permanent two wheeler driving license & should be able to drive two wheeler.	1. Tuberculosis Health Visitors recognized course 2. Government recognized Degree / diploma in Social work or Medical Social work. 3. Successful completion of basic Training course (Govt recognized) for Multipurpose Health workers. 4. Preference to those who have worked in NTEP.
2	STLS (Senior TB Laboratory Supervisor)	2	4 BC -A (W) - 1 5 OC -1	33,975/-	1. Graduation 2. DMLT or equivalent by Govt recognized institution . 3. Permanent two wheeler driving license. 1. Certificate of computer operation	1. Minimum one year RNTCP experience.
3	Lab Technician	4	56 OH (OC) - 1 9 OC - 1 10 BC -B(W) - 1 11 OC - 1	19,019/-	1. Intermediate (10+2) and Diploma or certified course in Medical laboratory Technician OR Equivalent.	1. One year experience in NTEP or Sputum Smear Microscopy . 2. Candidate with higher qualification (Graduation) shall be preferred.

Last date for submission of filled in BIO- DATA along with attested copies of certificates to the District TB Control Officer, Vizianagaram is on or before 17-11-2022 at 4.00 PM .

Note:- The applications received in the prescribed form with in the time shall only be considered can the society will not be responsible for postal loss for transit delays.

The applications should be in the format and the information should not be typed.

All copies (attested) of the certificate issued by the competent authority shall compulsory be Enclosed with the application form. Failing which the application shall be summarily rejected.


 District TB Control Officer
 Vizianagaram

NOTIFICATION

**DISTRICT TB CONTROL OFFICE, VIZIAANGARAM
DISTRICT HEALTH & FAMILY WELFARE SOCIETY,
NATIONAL TUBERCULOSIS ELIMINATION PROGRAMME (NTEP)**

Notification for the Recruitment drive for the Contract Posts in the District TB Control Office, Vizianagaram Under the District Health & Family Welfare Society(NTEP) Vizianagaram.

APPLICATION FORM

REGISTRATION NO:
(TO BE FILLED BY THE OFFICE)

POST FOR WHICH APPLICATION MADE

1.	Name of the Candidate		Paste photograph here and sign across it																
2.a	Name of the father																		
2.b	Name of the Mother																		
2.c	Name of Husband / wife (if married)																		
3.	Sex																		
4.	Date of Birth and age																		
5.	Social status (Please tick)	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="padding: 2px;">OC</td><td style="padding: 2px;">BC</td><td style="padding: 2px;">BC</td><td style="padding: 2px;">BC</td><td style="padding: 2px;">BC</td><td style="padding: 2px;">BC</td><td style="padding: 2px;">SC</td><td style="padding: 2px;">ST</td></tr><tr><td style="padding: 2px;"></td><td style="padding: 2px;">A</td><td style="padding: 2px;">B</td><td style="padding: 2px;">C</td><td style="padding: 2px;">D</td><td style="padding: 2px;">E</td><td style="padding: 2px;"></td><td style="padding: 2px;"></td></tr></table>	OC	BC	BC	BC	BC	BC	SC	ST		A	B	C	D	E			<p>Note: If the ST Candidate Comes under Local Scheduled area please submit their Local Scheduled Area Certificate issued by the Concerned MRO's</p>
OC	BC	BC	BC	BC	BC	SC	ST												
	A	B	C	D	E														
6.	Whether Physically handicapped (Please tick)	Yes / No																	
6.(a)	If yes please mention category (please tick)	HH / OH / VH																	
7.	Whether Ex-Service man / Women	Yes / No																	

DETAILS OF SCHOOL EDUCATION:

CLASS	YEAR OF PASSING	DISTRICT IN WHICH STUDIED
IV		
V		
VI		
VII		
VIII		
IX		
X		

STUDY CERTIFICATES FROM IVth TO Xth SHOULD BE ENCLOSED OTHERWISE CANDIDATE WILL BE TREATED AS NON-LOCAL

EDUCATIONAL QUALIFICATIONS:

QUALIFICATION	YEAR OF PASSING	NAME OF THE COLLEGE / UNIVERSITY

MARKS OBTAINED IN THE QUALIFYING EXAMINATION:

Qualifying Examination	Total Marks	Marks Obtained (As per the questions mentioned in the notification)	% of Marks obtained

EXPERIENCE in Govt.Sector:

Sl. No	Name of the PHC	Experience		No of Years Completed
		From	To	
1.				
2.				
3.				

ADDRESS PARTICULARS:

Name :
Father Name :
Husband Name :
House No. :
Street :
Village / Town :
District :
Pin :
Cell No. / Phone No. :

DECLARATION

I, Smt / Sri / Kum D/o / S/o / W/o

..... certify that above particulars furnished by me are correct to the best of my knowledge. I also agree that in the event of any of the particulars furnished in my application being found to be incorrect or false at a later date my candidature will be cancelled summarily

Name and Signature of the candidate

Signature of the Candidate

Check List

1. Name & Address of the Candidate :
2. Mobile No. :
3. Date of Birth (Mentioned in 10th Class) :
4. Caste :
5. Local / Non-Local :
(Study from 4th 10th more than 4 years
(i.e. from 4th to 10th) in Sriakulam District,
candidate belongs to Local other than Non-Local)
6. Physically Handicapped :
(Plz. mentioned % of PH
Only southern certificates are allowed)
7. Technical Training Marks :
(Secured / Max Marks)
8. Year of Passing :
(i.e. Registration Year)
9. Experience Certificate on Contract/
Out-Sourcing details :

Signature of the Candidate

Please submit your application
below Order:

- 1. Check List**
- 2. Application Form**
- 3. 10th Class Marks List**
- 4. Caste Certificate**
- 5. PH Certificate (SADARAM Certificate)**
- 6. Study Certificate (i.e., 4th to 10th class)**
- 7. Education Qualification (i.e., Technical Education)**
- 8. Registration Certificate**
- 9. Experience Certificate (Govt. Service Only)**