## **GENERAL INFORMATION AND INSTRUCTIONS**

- The agreement initially will be for 11 months and can be extended with mutual satisfaction.
- The contract may also be terminated by giving a notice of 15 Days of either party.
- Any other condition for working in Dhenkanal district is negotiable.
- This appointment is also subject to the following term and conditions.
- The hospital authority concerned will monitor the attendance and performance of such contractual doctors.
- The doctor concerned will work in preventive, curative & promative Health works at the concern Hospital of Dhenkanal District.
- There shall be no leave other then Casual Leave (C.L.) for 15 days during a Calendar year.
- Any other kind of leave in exigency will lead to proportionate loss of remuneration.
- Overage/Underage and under qualification in the prescribed educational qualification shall be rejected.
- Documents to be submitted:
  - HSC or equivalent certificate in support of declaration of age issued by the concerned Board /Council,
  - Certificate in support of all examination passed from (MBBS onwards.)
  - Certificate in support of completion of Internship at a recognized institution.
  - Certificate in support of Registration in any State Medical Council / Medical Council of India.
  - o Certificate in support of experience in particular field.
  - o One Passposrt size photograph
  - o If a candidates claims to posses qualification equivalent to the prescribed qualification, the rule / authority (with number and date) under which it is to be treated must be furnished.
  - Identity Proof ( Aadhar/ Driving License /Passport)

CDM&PHO, Dhenkanal

## **APPLICATION FORM**

(Please fill in the block letter)

Post Applied for		1				Photograph	
							- '
1. First Name:							
1. First Name.				Las	t Name :		₹
2. Date of Birth:		3. Age as on 01.07.2025		4. District of Domicile:			
5. Sex:							
6. Present Contact Ad	ddress with	telephone no	.:	7. Perman telephone		act Addre	ess with
08. Email Address:			09.Mobile No.:				
10. Languages spoken/written:							
11. Academic & Profe	ssional Qua	alification Deta	ails:				
Exam Passed				Marks Full/Part T			Full/Part Time/
- ,			,	Full Marks	Marks Secured	% of marks	Distance Learning
			·	:*			
	,	•					
	·						
12.Employment Recor	d:						
Total years of post	qualification	on experience		:			
Years of experience	ce in NHM		•				

13. Details	of Employment: (Use	e separate sheets if required).
Starting wit	h your present empl	oyment, list in reverse order all the employments you have had.
	nt Employment:	
From Month / Year	To Month / Year	Designation
Location of E	mployment:	•
Description o	of your duties:	
13 B. Previou	us Employment:	
From . Month / Year	To Month / Year	Designation •
Location of E	mployment:	
Description o	f your duties:	
eller and that uppressed by lat I have n sobedience/p	re that all the informa t, if any stage, it is me, my candidature/ lever been disengago oor performances/mis	tion furnished above are correct to the best of my knowledge and found that any of the above materials is false/ incorrect or is appointment is liable to be rejected/ terminated. I also declare ed from service previously on administrative ground such as sbehavior/criminal activity etc.

th Further, I undertake that I shall produce all original certificates/ documents in support of the above information at the time of interview/ certificate verification.

Date:
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Place:

**Full Signature of the Applicants**