

NOTIFICATION

Notification for the recruitment drive for the posts of **Lab Technicians Gr-II (4), Physiotherapist (1) & Staff Nurses (7) on Contract basis** posts Under the Administrative Control of Director of Medical Education, A.P., Vijayawada to work in **GOVERNMENT GENERAL HOSPITAL, SRIKAKULAM** vide Rc.No.1845/E1/E4/2021.

Applications are invited for the Posts of **Lab Technicians Gr-II (4), Physiotherapist (1) & Staff Nurses (7) on Contract basis** from the qualified candidates. Applications shall furnish to the Superintendent, GGH, Srikakulam in the prescribed format. The details can be obtained at Srikakulam District website address www.srikakulam.ap.gov.in

Si. No	Category	No. of posts sanctioned	Mode of recruitment	Qualification
1	Lab Technician Gr-II	04	Contract	Pass in SSC with Diploma in MLT or Intermediate with MLT. Must be registered in A.P. Paramedical Board
2	Physiotherapist	01	Contract	Must possess a requisite degree in Physiotherapy from a recognized university.
3	Staff Nurse	07	Contract	B.Sc. Nursing/ General Nursing & Midwifery course from Govt./ Govt.reg. Nursing Institute and Reg. of Nursing council., up to date Renewal.

The mode of selection is as per G.O.Ms.No.163, HM&FW (B1) Dept., dt:12.09.2018.

Schedule of the Recruitment:

Issue of Notification	14 -09-2021
Time period for submission of Applications	14-09-2021 to 23-09-2021

NOTIFICATION

Superintendent, Government General Hospital, Srikakulam

Notification for the recruitment drive for the posts of **Lab Technician Gr-II (4), Physiotherapist (1) & Staff Nurse (7)** on Contract basis under the Administrative Control of Director of Medical Education, A.P., Vijayawada to work at **GOVERNMENT GENERAL HOSPITAL, SRIKAKULAM.**

The eligible candidates should submit the necessary documents along with the application form and Demand Draft of Rs.300/- for Lab Technicians, Staff Nurses and 500/- for Physiotherapist in favour of Hospital Development Society, Government General Hospital, Srikakulam.

APPLICATION FORM

REGISTRATIN NO:
(TO BE FILLED BY THE OFFICE)

POST FOR WHICH APPLICATION MADE

1	Name of the Candidate		Paste photograph here and sign across it															
2a	Name of the father																	
2b	Name of the Mother																	
2c	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;"><tr><td>OC</td><td>BC</td><td>BC</td><td>BC</td><td>BC</td><td>BC</td><td>SC</td><td>ST</td></tr><tr><td></td><td>A</td><td>B</td><td>C</td><td>D</td><td>E</td><td></td><td></td></tr></table> <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		
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 in the qualifying examination	% of Marks obtained

EXPERIENCE in Govt. Sector:

Sl. No	Name of the Institution / projects of State / Central	Experience		No of Years completed
		From	To	

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