

## జిల్లా వైద్య ఆరోగ్యశాఖాధికారి వారి కార్యాలయము, విశాఖపట్నం

రిక సంఖ్య.964/G1/2024

తేది.18.01.2025

### పత్రికా ప్రకటన

శ్రీ కమిషనర్, ఆరోగ్య మరియు కుటుంబ సంక్షేమ శాఖ & మిషన్ డైరెక్టర్, నేషనల్ హెల్త్ మిషన్ ఆధ్వర్యంలో, విజయవాడ వారి ఆదేశాలు అనుసరించి, జిల్లా వైద్య మరియు ఆరోగ్య శాఖ, విశాఖపట్నం వారి ఆధ్వర్యంలో ఉమ్మడి విశాఖపట్నం జిల్లా లో గల ప్రభుత్వ ఆసుపత్రుల యందు ఒక ఏడాది కాలమునకు పనిచేయుటకు గాను ఈ క్రింది తెలిపిన పోస్టులను, కాంట్రాక్ట్ మరియు ఔట్సోర్సింగ్ పద్ధతి పై మెరిట్ మరియు రిజర్వేషన్ ల ప్రకారము నియామకములు జరుపుటకు అనుమతించిన కారణముగా దరఖాస్తులు కోరడమైనది.

Sl.No.	Facility	Name of the Post	No.of Vacancies	RoR (Roaster of Reservation)	Salary (Per Month)
1	DEIC	Medical Officer	02	25 ST (Backlog)	Rs.53,495/-
				27 SC (Backlog)	
2	RBSK/ DEIC	Audiologist Cum Speech Therapist	03	01-OC (W)	Rs.35,625/-
				02-SC (W)	
				03-OC	
3	RBSK/ DEIC/ TEIC	Early Interventionist Cum Special Educator	02	02-SC (W) (Backlog)	Rs.24,310/-
				04-BC A (W) (Backlog)	
4	RBSK/ DEIC/ TEIC	Child Psychologist	03	01-OC (W)	Rs.33,075/-
				02-SC (W)	
				03-OC	
5	RBSK/ DEIC	Optometrist	02	02-SC (W)	Rs.30,000/-
				04-BC A (W)	
6	RBSK/ DEIC	Dental Medical Officer	01	08-ST (W)	Rs.45,000/-
7	RBSK/ DEIC/ TEIC	Dental Technician	02	02-SC (W) (Backlog)	Rs.18,000/-
				04-BC A (W)	
8	RKSK	RKSK Consultant	01	02-SC (W)	Rs.34,729/-
9	RKSK	RKSK Counsellor	01	01-OC (W)	Rs.18,066/-

Sl. No	Name of the post	Education qualification
01	DEIC Dental Medical Officer	BDS from Any University recognized by Medical Council of India.
02	DEIC Audiologist Cum Speech Therapist	Bachelor Degree In Speech and Language Pathology from any recognized university.
03	DEIC/ TEIC Dental Technician	Dental Hygienist certificate from any institute recognized by dental council of India.
04	DEIC/ TEIC Early Interventionist Cum Special Educator	1) M.Sc in Disability studies (Early Intervention with basic degree in Physiotherapy or occupational therapy/speech language pathologist/MBBS/BAMS/BHMS OR 2) Post Graduate Diploma in Early Intervention with basic degree in Physiotherapy or occupational therapy/speech language pathologist/MBBS. OR 3) B.Ed Special Education/Bachelor in Rehabilitation science/ Bachelor in Mental retardation.
05	DEIC Medical Officer	MBBS Degree recognized by Medical Council of India.
06	DEIC/TEIC Child Psychologist	Masters Degree in Child Psychologist from any recognized university.
07	DEIC Optometrist	Bachelor in Optometry or Master in Optometry from any recognized university.
08	RKSK Consultant	MPH with BDS/BPT/B.Sc.
09	RKSK Counsellor	Qualified Degree in Social work preferably master in social work preferably women.

**నోట్:** సదరు పోస్టుల ఖాళీల సంఖ్య హెచ్చు తగ్గులు ఉండవచ్చునని తెలియ చేయడమైనది.

కావున ఆసక్తిగల అభ్యర్థుల <http://visakhapatnam.ap.gov.in> or <http://visakhapatnam.nic.in> నందు ఉంచబడిన దరఖాస్తును నింపి తత్సంబంధిత ద్రువపత్రములతోపాటు తేదీ.23.01.2025 సమయం సాయంత్రం 05.00 గంటలలోపు జిల్లా వైద్య ఆరోగ్యశాఖాధికారి వారి కార్యాలయము, విశాఖపట్నం నందు దరఖాస్తు చేసుకోవలసిందిగా కోరుతున్నాము.

*P. Rajendrakumar*  
జిల్లా వైద్య ఆరోగ్యశాఖాధికారి  
18/1/25

*18/01/25* విశాఖపట్నం

టు  
సదరు నకలు నోటిస్ బోర్డ్ నందు ఈ కార్యాలయంలో ప్రదర్శించడమైనది.  
డి. పి.ఆర్. ఓ . విశాఖపట్నం వారికి ప్రచురునార్థం పంపించడమైనది.  
ఇందలి ప్రతి జిల్లా కలెక్టర్, విశాఖపట్నం వారి సమర్పించడమైనది

**FRESH NOTIFICATION**  
**Rc.No.964/G1/2024,dt.17-01-2025**  
**(O/o District Medical and Health Officer,Visakhapatnam)**  
**HEALTH & FAMILY WELFARE DEPARTMENT**

FRESH NOTIFICATION for the recruitment drive for the Different posts in RBSK,DEIC& RSKK in NHM Scheme purely on temporary and Contract Basis for a Period of One Year working under the District Medical and Health Officer, Visakhapatnam Control.

APPLICATION FORM

Regd. No.  Application for the Post:   
 (To be filled by the Office)

1. Name of the Applicant :- (in Block Letters)	Latest Passport size photo					
2. Name of the Father :-						
3. Name of the Mother :-						
4. Name of Husband/ Wife(if married) :-						
5. Gender:	6. Date of Birth & Age: <input type="text"/>					
7. Religion:	8. OC/BC-A,BC-B,BC-C,BC-D, BC-E/SC/ST :-	<input type="text"/>				
9. Residential Address	House Number : Village / Town : District : Pin code : Phone : Aadhar Number : Email id :					
10. Whether belongs to Physically handicapped (Latest Certificate issued by Medical Board to be enclosed):						YES/No
11. If belongs to Ex-Servicemen; length of service in armed force (Certificate to that effect to be enclosed):						YES/No
12. Whether the individual is having sports quota and having Eligibility Certificate issued by the Sports Development Authority						YES/No
13. If belongs to Economically Weaker Sections (EWS) Candidate must submit Certificate obtained from Thasildhar)						YES/No
14. **Study and Conduct certificate details from Class- IV to X Class**						
	Study Certificates	School Name	Village	Mandal	District	Year of Study
	4 <sup>th</sup>					
	5 <sup>th</sup>					
	6 <sup>th</sup>					
	7 <sup>th</sup>					
	8 <sup>th</sup>					
	9 <sup>th</sup>					
	10 <sup>th</sup>					

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 and Renewal	Registration Valid upto
15	Experience certificate in Govt. Sector Contract/Outsourcing basis if any		Certificate enclosed YES/No

**DECLARATION**

I do hereby declare that all the above facts are true and correct. I further declare that if anything found incorrect I shall be liable for termination from service with immediate effect without any notice.

Signature of the Applicant

### CHECK LIST

SL. NO.	Enclosures	Status
1.	Filled in Application Form with latest Passport size photo affixed	Yes / No
2.	Gazetted - Attested copy of marks 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 IV to Class 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.	Gazetted - 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

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:

2. His /her services as.....on Contract/Out-sourcing honorary basis during the above said period are satisfactory.
3. He/she does not have any adverse remarks from his superiors during the period of Contract/Out-sourcing/Honorarium service.
4. 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 enclosed along with this service certificate, otherwise weightage for Contract/ Outsourcing/honorary service will not be considered for final merit.