

GOVERNMENT OF ANDHRA PRADESH
HEALTH MEDICAL AND FAMILY WELFARE

OFFICE OF THE DISTRICT MEDICAL AND HEALTH OFFICER, WEST
GODAVARI, ELURU

NOTIFICATION NO.07/2018, Dt:3.7.2018

RECRUITMENT OF 2nd ANM POSTS ON OUTSOURCING BASIS FOR A PERIOD
OF ONE (1) YEAR THROUGH ROGI KALYAN SAMITHI [H.D.S. COMMITTEE]

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Applications are invited from the eligible candidates for recruitment of the post of 2nd A.N.M. on outsourcing basis for a period of one (1) year at Sub-centre level in Primary Health Centres in West Godavari District. Applications should be submitted to the concerned Medical Officers of Primary Health Centres either in person (or) by Registered post. The last date for receipt of applications are **9.7.2018**. The details can be obtained at www.westgodavari.org

District Medical and Health Officer
West Godavari, Eluru

District Collector
West Godavari,Eluru

LIST OF VACANCIES WITH ROSTER POINTS

S. No	Name of the PHC	Name of the Sub Centre	No. of posts	Post reserved under category
1	PHC A Vemavaram	M.M.Padu	1	OC [Ex]**
2	PHC Palakoderu	Goraganamudi	1	BC-C
3	PHC Pippara	Muparthipadu	1	OC
4	PHC Dharmajigudem	Dharmajigudem-1	1	SC
5	PHC Penugonda	Kotalaparru	1	OC [W]
6	PHC LND Peta	Chegondapalli	1	Local ST
7	PHC Amaravaram	Pedaravigudem	1	Local ST
8	PHC Amaravaram	Amaravaram	1	Local ST
9	PHC Amaravaram	Upperu	1	Local ST
10	PHC Amaravaram	Veleru	1	Local ST
11	PHC Amaravaram	S R Nagaram	1	Local ST
12	PHC Kukunoor	Kukunoor	1	Local ST
13	PHC Kukunoor	Korlakunta	1	Local ST
14	PHC Kukunoor	Kondapalli	1	Local ST
15	PHC Kukunoor	Cheeravalli	1	Local ST
16	PHC Kukunoor	Dhacharam	1	Local ST
17	PHC Kukunoor	Aravapalli	1	Local ST
18	PHC Velairpadu	Bhudevipeta	1	Local ST
19	PHC Velairpadu	Velairpadu	1	Local ST
TOTAL :			19	

****** :- In case of non availability of OC(EX Service) , OC General will be considered.

The list of vacancies from Sl. No. 6th to 19th are to be filled, with only LOCAL SCHEDULED TRIBES.

Selection will be done based on the following criteria :

- The Selection shall be made based on merit.
- Merit list will be prepared basing on the marks obtained with above criteria and displayed on website for transparency.
- Selection list will be prepared from the finalized merit list duly following the rule of reservations and presidential order.
- The Collector & District Magistrate, W.G., Eluru is the final authority, its right and modify regarding terms/conditions laid down in the notification for conducting the various states up to selection.
- The department / Collector & District Magistrate, W.G., Eluru is final authority, its right for cancellation of the recruitment in various stages up to selection.
- Marks in MPHWF / Intermediate(vocational course – MPHA(F)) are the base for preparation of selection list on follow the above rule of reservation.

AGE :

- Candidate should completed 18 years of age and Maximum age 42 years as on 1.7.2018 as per G.O.Ms.No.182, Genl. Admn. [Ser.A] Dept., Dt:4.12.2017.
- In case of candidates belonging to B.C.'s , the concession of 5 years will be given as per G.O.Ms.No.759, GAD Dept., Dt:6.10.2007.
- In case of candidates belonging to S.C.'s, S.T.'s and Physically handicapped , the concession of 10 years will be given as per G.O.Ms.No.147, GA [Ser.D] Dept., Dt:16.5.2003

QUALIFICATION:

- 1] S.S.C./Intermediate; 2] MPHWF Training course with 18 months in the recognized by the Andhra Pradesh Nursing and Midwifery council or
- 3) The priority will be given to ASHA workers who have completed MPHA(F) Training course, and also priority will be given to local candidates in sub-centre area.
- 4) 2 years Intermediate(vocational course – MPHA(F)) with one year apprentice training in recognized Govt Hospitals or apprentice training in hospitals recognized by the by the Govt. of India, Chennai.
- 5)Candidate should able to field duty.

TERMS AND CONDITIONS :

The candidates should belongs to the same Sub-centre area, if the candidates are not available in those Sub-centre, selection will be made from that mandal, and if not available in that mandal, they will be selected from nearest area in the district.

HOW TO APPLY

- a. Candidates shall download the application form from the website and submit their filled in application forms along with the enclosures to the concerned above PHC's in West Godavari, on or before 9.7.2018.
- b. The following documents are to be submitted in the following order only.

1.	Filled in application form with full postal address, phone No. and E-mail I.D., and indicate the name of the Sub-centre where seeking for 2 nd ANM post of the concerned PHC.
2.	Attested copy of marks memo of SSC (or) equivalent certificate
3.	Attested copies of Provisional Certificates, Certificate of Registration for Health Worker, Counsel Registration upto date, duly attested. If the candidates seeking appointment in Tribal are in Sl.No.6 to 19 in the same vacancies, should submit latest "Agency Certificate of Local Scheduled Tribe Candidates" issued by the concerned Tahsildar.
4.	Attested copy of marks memos of MPHWF / Inter vocational .
5.	Attested copy of latest caste certificate (in case of SC/ST/BC) issued by the concerned Tahsildar, below the period of 1 year.
6.	Attested copies of study certificates from Class-IV to X where the candidate Studied. Residence certificate issued by the concerned Tahsildar.
7.	Attested copy of latest Physically handicapped certificate (if applicable)
	List of enclosures should indicate in the application form

**GOVERNMENT OF ANDHRA PRADESH APPLICATION FOR THE
POST OF "2nd A.N.M." ON OUTSOURCING BASIS UNDER NHM
OF DM&HO, ELURU - W.G. DISTRICT**

Latest Passport
Size Photo with
self attestation

**NAME OF THE SUB-CENTRE, WHERE SEEKING :
FOR THE POST OF 2nd A.N.M.**

1. NAME OF THE APPLICANT :
(In Block letters as in SSC/
Equivalent Examination Certificate)

2. NAME OF THE FATHER/HUSBAND :

3. DATE OF BIRTH :
(As entered in SSC/Equivalent
Examination (Copy to be enclosed))

Date	Month	Year

4. AGE AS ON 1.7.2018 :

Year	Month	Date

5. SOCIAL STATUS :
(Attested copy of latest caste certificate
Issued by the Tahsildar concerned)

SC	ST	BC (with group)	Others

**6. Whether belongs to Physically Handicapped
: (latest certificate issued by Medical Board
to be enclosed)**

Yes / No

7. Whether belongs to Ex-serviceman

8. DETAILS OF SCHOOL (S) :

Sl..No	Class	Year of Passing	School & Place	District
1	IV			
2	V			
3	VI			
4	VII			
5	VIII			
6	IX			
7	X			

8. EDUCATIONAL QUALIFICATION :

(Please enclose attested copy of relevant certificate of qualifying examination)

Qualification	Year of Passing	Name of the College & Ins	Marks	
			Maximum Marks In	Marks Obtained

9. Year of Completion of MPHWF / Inter Voc-MPHWF ::
(Please enclose attested copy of relevant certificate)

10. Attested Copy of Council Registration if applicable ::
(Please enclose attested copy of relevant certificate)

Name of the Council Registration	Registration No.	Date of Registration	Last Date of Registration

11. Address for communication along with Mobile Number and Email ID ::

DECLARATION

I . _____ S/o / D/o _____ certified that the particulars given above are correct to the best of my knowledge and belief. I also agree that in the event of any of the particulars furnish in my application being found to be incorrect or false at a later date my appointment will be cancelled summarily.

SIGNATURE OF THE APPLICANT

List of enclosures:

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12

SIGNATURE OF THE CANDIDAT

