## Advertisement

# District Health & Family Welfare Society,

### <u>Fatehabad</u>

Date: 04.12.2024

## Advertisement No. 12/2024

DHFWS Fatehabad invites application for filling up of various vacant posts under Various Schemes under National Health Mission (XV Finance Commission & NHUM) Programme for different Health Institutions in District Fatehabad. Posts are purely on contract basis for fixed period initially up to 31<sup>st</sup> March 2025. The candidate shall ensure that they fulfill all the eligibility criteria required for the post.

Post	post.									
S	Name of the	No. of	Place of Posting	Essential	Age	Consolidated				
r.	Post	Post &		Qualification	Limit	Remuneration				
N		Category								
o										
1.	Medical	04	1 for .UHWC Near	Essential:	Up to	Rs. 65,000/-				
	Officer		Bhattu Road,	MBBS from a	64	P.M.				
	(UHWC	Gen - 2	Fatehabad	recognized institute,	Years					
	under XV	BC A-1		registered with						
	Finance	SC - 1	1 for UHWC	Haryana Medical						
	Commission)		Thakkar Basti,	Council						
			Fatehabad	Desirable:						
				Knowledge of Hindi						
			1 for UHWC	upto Matric Standard						
			Sunder Nagar,							
			Tohana							
			1 for UHWC							
			Bajigar Mohalla,							
			Tohana							
2	Medical	03	1 for .UPHC Ashok	Essential:	Up to	Rs. 65,000/-				
	Officer		Nagar, Fatehabad	MBBS from a	64	P.M.				
	(NUHM)	Gen -1		recognized institute,	Years					
		BCA-1	1 for UPHC Raj	registered with						
		SC - 1	Nagar, Tohana	Haryana Medical						
				Council						
			1 for UPHC Bhuna	Desirable:						
				Knowledge of Hindi						
				upto Matric Standard						

#### **IMPORTANT PROVISIONS / INSTRUCTIONS**

- 1. The applicant must mention the details of certificates attached with application and sign the application at designated places. Candidates will number all the Papers/Documents attached with application form and mention the number of pages in the application form.
- 2. Applications will be accepted up to dated 05-12-2024 to 24-12-2024 at 05:00 PM for all the posts & should be addressed to Civil Surgeon, Fatehabad, HUDA Sector-3 Fatehabad Haryana Pin-125050. Name of post, Post Cat. No. as mentioned in the advertisement should be mentioned on the envelope. The application form without having the post name and category no. of post will be rejected. Application with cutting shall also be rejected. The applicant must mention the details of certificates attached with application and sign the application at designated places. Candidates will number all the Papers/Documents attached with application form and mention the number of pages in the application form.

- 3. Application forms will be accepted only by hand.
- 4. Application Format can be downloaded from the link **nhmfatehabad.org** No other formats will be accepted.
- 5. Each application must be duly signed by the applicant and self-attested certified copies of documents should be attached with application form. Self-attested photograph of the applicant must be pasted at the designated place.
- 6. Application fees Rs. 200/- for each category. Candidate should submit the above fee in the account as detailed below:-

Account No - 100062019049 IFSC Code - INDB0000759

Accunt Holder Name - District Health & Family Welfare Society Recruitment A/c

Bank Name - Indusind Bank Fatehabad.

This fees is Non Refundable. Candidate should attach the 2 copies of acknowledgement slip of fee submitted by him/her with the application form.

Note- Application fee can be submitted through any UPI/Google Pay/ Paytm/Phone Pay.

Candidate will mention the name, father's name, post catgory and address on the remarks of UPI Payment mode (any UPI/Google Pay/ Paytm/Phone Pay)

- 7. **Date of Advertisement will be considered for calculation of Age**. The Candidate Should be below 64 Years of age.
- 8. Unsigned applications without required documents and application will be rejected.
- 9. All markings/ numbering shall be done with blue/black ball pen only.
- 10. No T.A. /D.A. will be paid to attend the interview.
- 11. Posts can be increased, decreased or withdrawn by District Authorities (Civil Surgeon, Fatehabad) without any further notice. NHM Selection Criteria shall be followed in the selection process:-

Table: A Revised Selection Criteria for the recruitment at District level.

Sr.	Components	Weightage	Marking Pattern	
No				
1.	Essential Basic Qualification	30	30 x percentage/ 100	
2.	Additional Relevant Post Experience (any	10	02 marks for each	
	state Govt./Semi Govt./ UT/any Govt.		completed year (Maximum	
	Board / Corporation/NHM)		10 Marks).	

- 12. Candidates applying for a post must ensure that they fulfill all the eligibility conditions. If in verification at any time before or after the appointment, it is found that applicant do not fulfill any of the eligibility condition or it is found that the information furnished is false or incorrect then their candidature/Appointment will be cancelled and selection terminated.
- 13. For any other information regarding this advertisement kindly check official web page <a href="mailto:nhmfatehabad.org">nhmfatehabad.org</a> time to time. No further information will be given in any newspaper.
- 14. The applicants are advised to visit the site for any change in schedule or the status of their application on website only. They are not to visit the office of undersigned or contact any person in this office for the same. Any candidate found canvassing or influencing the selection process or approaching the selection committee or any person related to the working of this shall be disqualified and his candidature rejected immediately without giving any chance. Any person or candidate found using unfair means to influence the selection process shall be debarred from selection and candidature rejected.
- 15. If at any stage it comes to the notice of selection committee that wrong information has been

- supplied by the candidate his selection shall be cancelled and legal proceedings shall be initiated against the candidate.
- 16. District authorities has right to correct any clerical mistake found at later stage of recruitment process. Applicant shall not claim for such clerical mistakes.
- 17. Posting Station will be allotted as per merit list.
- 18. Any additional work/placement under NHM can be assigned by appointing authority. Contract may not be renewed automatically and Civil Surgeon has the right to terminate the contract immediately if performance is found unsatisfactory.
- 19. Selected candidate shall not have any claim for regularization of his/her services based on the duties performed under this contract.
- 20. There is no provision to allow private practice after duty times or on holidays to staff recruited under NHM.
- 21. A candidate must be in good mental and physical health and free form any physical defect, which is likely to interfere with the efficient performance of the duties required for the post. The appointment shall be subjected to their being declared medically fit as per medical fitness standards followed by the Health Department.
- 22. The candidate are required to bring all original qualification certificates, relevant documents etc and to submit the Self attested legible copies of following qualification certificates and relevant documents along with the application form on the date of walk-in:
  - (i) Valid document as a proof for date of Birth (10<sup>th</sup> Certificate/ Birth certificate)
  - (ii) Degree Certificate of requisite qualification.
  - (iii) PG Degree /Diploma Qualification certificate as required.
  - (iv) Mark sheet of each year/Semester.
  - (v) Registered as Medical Practitioner with Medical Council of India or any other State medical Council of India Union.
  - (vi) Additional relevant Post's Experience (any State Govt. /Semi Govt. /UT / any Govt. Board /Corporation/NHM) will be considered. Pls specify the working on full time basis with complete details like Letter no. and date of issue, Designation, Date of Joining and Date of Resignation. The Period of experience rendered by candidate on part time basis shall not be counted while calculating the valid experience.
  - (vii) Two latest passports size colored photographs.
  - (viii) Candidate calming reservation should submit the copy of latest reserve category certificate issued by the competent authority as per latest Govt. instructions.
- 23. The Candidate whose Services have been terminated form any Govt./ Semi Govt./ Corporate Board on disciplinary basis will not be eligible. Person whose enquiry pending in criminal case / Fir is lodged will also be considered as not eligible.
- 24. NHM Service-Bye Laws 2018 are subjective to decision by Finance Department, Haryana/Higher Authority (Letter no- HM/ADMIN/2024/6830-51 Dated 20-11-2024). This office reserves the right to cancel the whole recruitment process at any time at any stage without assigning the reason to the candidates.

Chairman, Executive Committee
District Health & Family Welfare Society,
Fatehabad

# District Health & Family Welfare Society, Fatehabad

			Application	n Form for Adve	ertisement No	o.:- 12/2024			
		(All supporting Do	ocuments/Ce	rtificates are req	uired to be at	tached with 2	<i>Applicati</i>	ion Form)	
Application for Post Category No.			Name of the	Post				Latest Self Attested	
Sr. No.		Description			To be Filled by the Candidate				Passport size Photo of
1.	Persoi	onal Information							Candidate
1.1	Name	ume of the Candidate (In Capital Letters)							
1.2	Father's Name (if unmarried)/ Husband's Name (If Married)								
1.3	Date of Birth (Date/Month/Year)								
1.4	Marita	l Status (Single/Married/	(Other)						
1.5	Permanent Address (With PIN Code)								
1.6	Catego	tegory (Gen/SC/BC/EWS etc.)							
1.7	Mobile/Contact No.								
1.8	E-mail	Address (in capital lette	ers)						
	l	Academic /Professiona	l Qualificatio	ons (Starting fro	m Highest Do	egree) (Attaci	h Additio	onal Sheet, if Re	quired)
Degr Clas	ss/	Name of University/ Institute/		Passing Year	Status of Marks			Name of Subject/Specification of degree/diploma	
Diplo	ma	Board			Total	Obtained	%		

morn Experience (St	Period of			tach Additional Sheet, if Required)		
	1 Criod of	300		Name of Organization/Institution/Department If any from (State Govt./Semi Govt ./UT/Govt. Board/Corporation /NHM/Central Govt.)		
Designation	From	То	Gross Salary			
4. Any Other Information, the	 Candidate would	like to give in suppor	 rt of her/his candidature	 e(Attach Additional Sheet, if Required)		
•						
attached with application  2. Experience should be obt  3. I have read instructions can  Date:	tained after essent		elevant to post applied.	(Signature of the Candidate)		
(To be filled by the candidate) (At	tach Additional Si	heet, if Required)				
List of Document attached: - 1		7				
2	•••••	8	8			
3	•••••	••••••	9			
4		••••••	10			
5			11			
6			12			
			Acknowledgement Payment	t No. of UPI		
			Amount	Date of Payment		
Date:				(Signature of the Candidate)		