

**ADVERTISEMENT**  
**ZILLA SWASHYA SAMITI(ZSS), BHADRAK**

Applications on the proforma given below are invited from the suitable candidates for filling up one number of post of Senior DOTS Plus and TB-HIV Supervisor under RNTCP in the office of the CDMO Bhadrak on contractual basis for a period of one year.

**Qualification of Senior DOTS Plus & TB-HIV Supervisor:**

Graduate

**Preferential Qualification:**

1. At least 3 years of work experience on supervisory capacity under RNTCP.
1. At least 5 years of work experience in other programme of Health department on supervisor capacity.
2. The applicant must be willing to travel within the area of work.

**Age:**

The candidate should be below 32 years of age as on 01.08.11 and for retired Govt. servants upto 62 years.

**Remuneration:**

Rs.15,000/- per month (Consolidated).


**Note:**

- ORV Act and Rules 1985 is not applicable for this post.
- Preference will be given to the applicants of Bhadrak district.
- Selection will be made strictly on the basis of merit taking into consideration the career marking and interview mark.
- Only 3 short listed candidates will be called for interview.
- The authority reserve the right to cancel the said engagement at any time without assigning any reason thereof.

**N.B.:-**

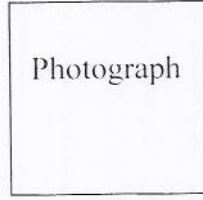
The complete application form with following documents is to be attached with and should reach the office of the undersigned on or before 22.08.11 within 5.00P.M by registered post/speed post. The applications received after the due period will be rejected.

1. Two pass port size photograph attested by a gazetted officer.
2. Self attested copies of certificates and mark sheets from HSC onwards in proof of age, qualification and experience.
3. Residential certificate issued by the Tahasildar/Sub-Collector.
4. The candidates should mention the "POST APPLIED FOR \_\_\_\_\_" on the cover of the envelope.

  
Chief District Medical Officer,  
Bhadrak

**PROFORMA**

1. Post applied for :
2. Name of the candidate (Block Letters):
3. Name of the father:
4. Date of Birth:
5. Present Address:
6. Permanent Address:
7. Qualification



Sl.No.	Name of the Exam	Name of Board/University	Percentage of Mark
1	HSC		
2	+2		
3	+3		

8. Experience if any:

**DECLARATION**

I do hereby declare that the particulars furnished by me in this form are true to the best of my knowledge and belief. In case they are found false, my candidature shall be liable for rejection.

Date / Place :

Signature



Chief District Medical Officer,  
Bhadrak