#### GOVERNMENTOFANDHRAPRADESH

# **HM&FW** Department

Director of Secondary Health, Erstwhile Guntur District

(Notification No:02/2025, Date:25.08.2025)

Recruitment to the various posts to work on contract basis/Out Sourcing basis in

Govt. Health facilities					
	olication for the Post of :			Affix Pass port size latest colour photograph	
1	Name of the Candidate				
2	Gender				
3	Fathers Name				
4	Date of Birth(DD-MM-YYYY)				
5	Social Status (OC/OC-EWS/SC/ST/BC-A,B,C,D,E)				
6	Whether Physically Handicapped (VH/HH/OH) (SADAREM Certificate to been closed)				
7	Whether claiming EWS reservation (copy of the certificate enclosed)				
8	Whether Ex-Servicemen (enclose Service Certificate)	Yes /No	)		
9	Mobile number of the applicant				
10	Payment particulars	Transaction ID.	Date:	Amount:	
11	Address for communication:				

# Marks obtained in the requisite Academic / Professional / Technical qualification

Qualification	Maximum Marks	Marks obtained	Year of passing (Month & Year)	Whether registered in respective council (Yes/No)

# <u>Details of School studies from 4<sup>th</sup>Class to 10<sup>th</sup>Class (for local status):</u>

SI. No	II IASS	Year of passing	Name of the School	Town and District
1	IV			
2	V			
3	VI			
4	VII			
5	VIII			
6	IX			
7	Х			

# **DECLARATION**

I, Smt/Kum/Sri	D/o	or S/o or W/o			do
hereby declare that, above	e particulars furnished	by me are true t	to the best of	of my know	ledge. I
agree that in the event of a	any of the details furnis	hed above being	found to be	incorrect or	false at
a later date my candidatur	e will he forfeited summ	narily			

Signature of the applicant

# APPENDIX-I

# CERTIFICATE OF RESIDENCE

(Vide Subcertified,	o-Clause (ii) of Clause (a) pa	ara7 of the Presidential order	r) It is hereby
(a) T	「hat Sri/Smt/Kum		
	D/o tion(S.SC) Examination in (m		time for the
whole or		in any educational institutional academic years ending with the aforesaid examination;	_
of the	•	ely preceding the commence /she resided in the follo	
Village	Taluk	District	Period
1.			
_			
2.			
3.			
4.			
5.			
6.			
7.			
Station: Date:	OFFICE SEAL	Officer of Revenue Department Below the rank of Tahsildhar Deputy Tahsildhar in independent Charge Of a Sub Taluk	r or
Date:			

\*Strike off 'whole' 'a part', as the case may be.

# ::CHECKLIST::

SI. No.	Enclosure	Enclosed
1	Memo of SSC(or)equivalent certificate	Yes/No
2	Latest caste certificate(in case of SC/ST/BC)	Yes/No
3	Latest EWS (Economically Weaker Sections) certificate issued by the competent authority in case of EWS categories	Yes/No
4	Latest physically handicapped certificate issued in sadarem.	Yes/No
5	Ex-servicemen/women in armed forces certificate(if applicable)	Yes/No
6	Sports claiming(if applicable)	Yes/No
7	Study certificates from Class-IV to X where the candidate studied regularly. As per para no.8 (f) of notification	Yes/No
8	Marks memos of all the years of qualifying examination	Yes/No
9	Provisional/Permanent certificate of qualification	Yes/No
10	Permanent registration certificate of A.P. Nurses& Midwives Council/A.P. Para Medical Board.	Yes/No
11	Any other certificates as relevant and applicable	Yes/No
12	Service certificate issued by the concerned government department all institution head (if applicable)	Yes/No
13	Latest passport size photograph of the applicant with attestation	Yes/No
14	Application fee should be paid by way of UPI transfer/RTGS/NEFT to the A/c. No. with IFSC code and enclose transaction receipt along with application.	Yes/No

Signature of the applicant