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| अर्ज क्र. कार्यालयीन वापर |

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| Clear recent passport size Photo |

National Health Mission, Dist. Mumbai

Year 22-23 (Advertisement No.01/2023 Publish **Daily Loksatta Date 25/02/2023**

Applying Post Name : ..........................................................................

( All fields in the forms are mandatory to by filled an incomplete form submitted will be treated as rejected )

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| --- |
| Full Name :- |
| Date of birth

|  |  |  |
| --- | --- | --- |
| DD | MM | YYYY |
|  |  |  |

 | Blood Group | Gender

|  |  |  |  |
| --- | --- | --- | --- |
| M |  | F |  |

Marital Status: |
| Age: | Existing NHM Employee (Yes / No)

|  |  |
| --- | --- |
|  |  |

 | Nationality : |
| Candidates Category : | Applying Category : | Cast Certificate Attached Yes/No

|  |  |
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Address/Contact Details :- (Name of the District and Pin code is compulsory)

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| Address :State :Contact No. ............................................................... E-mail ID Correspondence ................................................ |

 Academic/Professional Educational All summary : (Starting from most recent)

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From(MM/YY | To(MM/YY | Degree /Diploma | University / Institute | Specialization / Subjects | Final Year Total Mks | Final Year Obtained Mks | Final Year % | ATKT If any (yes/No) |
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Note-CGPA/Grade points conversion in % should be provided by candidate from respective university/college signed copy

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| List of Documents self - attested copy to be attached with Application:1) Application form Duly filled in the prescribed format.2) Small Family Certificate3) Experience Certificate4) Educational Certificate5) Caste certificate & caste validity certificate6) for age proof- School leaving certificate/10th passing certificate/Domicile certificate7) computer proficiency - MS-CIT/DOEACC Course- for the post if applicable8) others |

Work experience summary : (starting from current/most recent

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Sr. No. | From(MM/YY | To(MM/YY | Total period in years & Months | Organization | Designation | Responsibilities (Min.30 & Max.50 words | Experience certificate Outword No & Date |
| Govt. Experience |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| Semi Govt. experience |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| Private experience |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| Total experience ( In Years & Months)A) Government :B) Semi government :C) Private : | Relevant Experience to the post applied( in Years & Months) : A) Government :B) Semi government :C) Private : |

|  |  |
| --- | --- |
| Computer Proficiency : |  |
| Typing skill : | Marathi typing 30 w.p.m. (yes/No) :English typing 40 w.p.m. (yes/No) : |
| Demand Draft : | No :........................... Date / /20 Bank Name : .............................................................. |

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| Declaration :I hereby declare that all statements made in the application are true, complete and correct to the best of my knowledge and belier. I understand that in the event of any information being found untrue/false/incorrect of I do satisfy the eligibility criteria my candidature will be cancelled will be cancelled, without assigning any reason thereof. I have read the content of the advertisement and agree to abide by the rules, regulations and procedures for appointment to the post applied for.Name :Place :Date : Signature |

Disclaimer :

The applicants are required to submit the full filled application on the day of walk in interview

( Office use only )

Remark : ...................................................................................................................................

Name of Authority: .............................................................. Signature of Authority : .............................................