GOVERNMENT OF INDIA  
OFFICE OF THE ADDITIONAL DIRECTOR  
CENTRAL GOVT. HEALTH SCHEME  
OLD A.G. COLONY, UNIT-IV,  
BHUBANESWAR-751001.  
E-mail: adbh@cghs.nic.in Ph:0674-2500127

No. Recruitment./CGHS-BBSR/16-  
Dt. 09.05.2018

Advertisement no. 01/2018

Applications are invited from the eligible candidates by post in the prescribed format upto 15.06.2018 for filling up the following posts at Central Government Health Scheme, Bhubaneswar. In respect of application sent from the candidates residing in Assam, Meghalaya, Arunachal Pradesh, Mizoram, Manipur, Nagaland, Tripura, Jammu & Kashmir, Lahaul & Spiti district and Pangi sub division of Chamba district or Himachal Pradesh, A & N Islands or Lakshadweep the last date of receipt of application is 22.06.2018. Candidates are required to send their application by post to “The Additional Director, Central Government Health Scheme, Old AG Colony, Unit-IV, Bhubaneswar-751001, Odhisa “. Application received after due date will not be considered.

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<thead>
<tr>
<th>Sl no.</th>
<th>Post</th>
<th>UR</th>
<th>OBC</th>
<th>SC</th>
<th>ST</th>
<th>Total</th>
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<tbody>
<tr>
<td>1</td>
<td>MTS(MA)</td>
<td>04</td>
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<td>MTS(LMA)</td>
<td>02</td>
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Abbreviation : MTS (MA)- Multitasking staff (Medical Attendant); MTS(LMA): Multitasking Staff (Lady Medical Attendant); UR: Unreserved; OBC: Other Backward Class; SC: Schedule Caste; ST: Schedule Tribe; Exs: Ex-serviceman; HH: Hearing Handicapped; VH: Visually Handicapped; OH: Orthopedically Handicapped; MH: Mentally Handicapped.

Pay Scale : 1. MTS (MA): Pay Band-I, Rs. 5200-20200 with grade pay of Rs. 1800/- (Level -1 as per 7th CPC)
2. MTS(LMA): Pay Band-I, Rs. 5200-20200 with grade pay of Rs. 1800/- (Level-1 as per 7th CPC)

Age Limit :
For MTS(MA) :- Between 18 and 25 years

For MTS(LMA) :-Between 18 to 25 years (Relaxable to Govt. Servant upto the the gar of forty years in the case of general candidates and upto forty five year in the case of candidates belonging to the scheduled castes or the scheduled tribed in accordance with the instruction or orders issued by the central Govt. from time to time.)

Note : The crucial date of determining the age limit shall be the closing date for receipt of application in India (and not the closing dates for those in Assam, Mizoram, Manipur, Nagaland, Meghalaya, Arunachal Pradesh, Sikkin, Ladakh Division of Jammu and Kashmir state, Lahaul and Spiti Districts and Pangi Sub Division of Chamba District of Himachal Pradesh, Andaman and Nicobar Islands or Lakshadweep)
Essential qualification: 1. 10th pass from a recognized Board
   And
   2. Certificate in first aid from Central Government or State Government
      recognized institution.

Probation: Two years

Note: The Period of two years shall include successful completion of mandatory induction training
      of two weeks duration.

Place of work: Bhubaneswar, Odisha

Terms & Condition:

1. Candidates need to apply in the prescribed application form & send their application by post only. Application not in the prescribed format will not be accepted. Application will not be accepted by hand.

2. Applicant may send their application in an envelope and the envelope should be superscribed as “Application for the post of ............” & category..................

3. Candidates need to attach self attested testimonial/certificate in respect of claim of age, education qualification, experience etc. With the application form.

4. SC/ST/OBC candidates claiming age relaxation have to submit relevant certificate as per the prescribed proforma (annexure-I), otherwise claim of age relaxation will not be considered.

5. No TA/DA shall be paid to the candidates for appearing in the test/interview.

6. Candidates who are already in the Government service should apply through proper channel with no objection certificate. They shall have to produce “No Objection Certificate” from the present Employer at the time of document verification /interview and they shall have to submit release order at the time of joining.

7. Application for, which is incomplete in any respect, such as without photograph and signature, without requisite document is liable to be rejected summarily.

8. Information submitted by an applicant in his/her application will bind the candidate and if found to be false, his/her candidature will be cancelled forthwith and he/she shall be liable for criminal prosecution.

9. The certificate for claim of reservation must be issued by competent authority as per the prescribed format.

10. If any candidate is found canvassing directly or indirectly, his/her candidature will be liable for rejection.

11. Additional Director, CGHS, Bhubaneswar reserves the right to cancel, alter or modify the advertisement or other terms and conditions of the advertisement without any prior notice.

12. All other matters which are not specifically provided in this advertisement shall be decided by the competent authority of CGHS, Bhubaneswar.

Additional Director
Central Govt. Health Scheme
FORMAT OF APPLICATION FORM

1. Advertisement no. :
2. Serial no. of the post :
3. Post applied for :
4. Name of the Employment Exchange where registered, if any
5. Employment Exchange registration No, if any :
6. Name of the applicant (Mr/Miss/Mrs) :
   (In BLOCK LETTERS)
7. Date of Birth : (DD/MM/YY) :
8. Father’s name :
9. Address for correspondence:
10. E-mail ID :
11. Contact no. :
12. Nationality :
13. Category to which belong (UR/SC/ST/OBC):
   (Attach self attested copy of certificate)
14. Whether Ex-serviceman (YES/NO) :
15. Whether physically handicapped (Yes/No) :
16. Academic/technical/professional qualification :
   (Attach self attested copy of certificate)

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<tr>
<th>Sl no.</th>
<th>Name of Exam.</th>
<th>Year of passing</th>
<th>University/Board</th>
<th>Div./Class/Grade</th>
<th>Subjects</th>
<th>% of marks.</th>
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17. Experience (attach self attested copy of certificate)

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I solemnly declare that the statement made by me in this form are correct to the best of my knowledge and belief.

Date : (Full Signature of the applicant)

Place :

List of enclosure : 1.
   2.
   3.
PREScribed PROFORMA

Proforma-1

The form of certificate to be produced by Scheduled Castes and Scheduled Tribes candidates applying for appointment to posts under the Government of India

This is to certify that Shri/Shrimati/Kumari* ......................................................
son/daughter* of ...................................................... of village/town*
............................................... in District/Division* ........................................... of the
State/Union Territory* ................................ belongs to the............................ Caste/Tribe* which
is recognised as a Scheduled Caste/Scheduled Tribe* under:—

@ The Constitution (Scheduled Castes) Order, 1950
@ The Constitution (Scheduled Tribes) Order, 1950
@ The Constitution (Scheduled Castes) Union Territories Order, 1951
@ The Constitution (Scheduled Tribes) Union Territories Order, 1951


@ The Constitution (Jammu and Kashmir) Scheduled Castes Order, 1956
@ The Constitution (Andaman and Nicobar Islands) Scheduled Tribes Order, 1959 as amended by the Scheduled Castes and Scheduled Tribes Order (Amendment) Act, 1976
@ The Constitution (Dadar and Nagar Haveli) Scheduled Castes Order, 1962
@ The Constitution (Dadar and Nagar Haveli) Scheduled Tribes Order, 1962
@ The Constitution (Pondicherry) Scheduled Castes Order, 1964
@ The Constitution (Uttar Pradesh) Scheduled Tribes Order, 1967
@ The Constitution (Goa, Daman and Diu) Scheduled Castes Order, 1968
@ The Constitution (Goa, Daman and Diu) Scheduled Tribes Order, 1968
@ The Constitution (Nagaland) Scheduled Tribes Order, 1970
@ The Constitution (Sikkim) Scheduled Castes Order, 1978
@ The Constitution (Sikkim) Scheduled Tribes Order, 1978
@ The Constitution (Jammu & Kashmir) Scheduled Tribes Order, 1989
@ The Constitution (SC) Order (Amendment) Act, 1990
@ The Constitution (ST) Order (Amendment) Act, 1991
@ The Constitution (ST) Order (Second Amendment) Act, 1991
@ The Scheduled Castes and Scheduled Tribes Orders (Amendment) Act 2002
@ The Constitution (Scheduled Castes) Order (Amendment) Act, 2002
@ The Constitution (Scheduled Castes and Scheduled Tribes) Orders (Amendment) Act, 2002
@ The Constitution (Scheduled Castes) Orders (Second Amendment) Act, 2002

% 2. Applicable in the case of Scheduled Castes/Scheduled Tribes persons who have migrated from one State/Union Territory Administration to another.

This certificate is issued on the basis of the Scheduled Castes/Scheduled Tribes certificate issued to Shri/Shrimati*.................................................... Father/Mother of
Shri/Shrimati/Kumari ...................................................................... of village/town*
........................................................................................................ in District/Division*........................................ of the State/Union
Territory*........................................ who belongs to the Caste/Tribe* which is recognised as a
Scheduled Caste/Scheduled Tribe in the State/Union Territory* of
........................................................................................................ issued by the .................................................. dated
........................................................................................................

% 3. Shri/Shrimati/Kumari*................................................................. and/or* his/her* family
ordinarily resides in village/town*.............................................. of........................................
District/Division* of the State/Union Territory* of.........................................................

Signature.................................................................

**Designation.................................................................

(With Seal of Office)

State/Union Territory*
Place: ..............................
Date: ..............................

*Please delete the words which are not applicable.
@Please quote specific Presidential Order.
% Delete the paragraph which is not applicable.

NOTE: The term "ordinarily reside (s)" used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.

**List of authorities empowered to issue Scheduled Caste/Scheduled Tribe Certificate.

(i) District Magistrate/Additional District Magistrate/Collector/Deputy Commissioner/Additional Deputy Commissioner/Deputy Collector/1st Class Stipendiary Magistrate/† Sub-Divisional Magistrate/Taluka Magistrate/Executive Magistrate/Extra Assistant Commissioner.
†(not below the rank of 1st Class Stipendiary Magistrate).

(ii) Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate.
(iii) Revenue Officers not below the rank of Tehsildar.
(iv) Sub Divisional Officer of the area where the candidate and/or his/her family normally resides.
(v) Administrator/Secretary to Administrator/Development Officer(Lakshadweep)

Proforma-II

The form of certificate to be produced by Other Backward Classes candidates applying for appointment to posts under the Government of India.

This is to certify that
Shri/Shrimati/Kumari* ........................................... son/daughter* of
Shri........................................ of village/town* .............................. in District/Division*............. of
the State/Union Territory*.......................belongs to the ..................Community which is recognised as a backward class under:


Shri/Shrimati/Kumari* .....................................and/or* his/her* family ordinarily resides in village/town* ..................................... of........................................ District/Division* of the State/ Union Territory* of........................................


Signature........................................

**Designation..............................

(With seal of Office)

State/Union Territory

Place....................................................

Date....................................................

*Please delete the words which are not applicable.

@ Strike out whichever is not applicable.