

Application Form for in-house contractual employees of NHM working in the same post under the OSH&FW Society in other districts desiring to be posted in Jajpur District

1. Name of the position applied for:
2. Name of the Applicant:
3. Present Place of Posting:
4. Date of Joining in the same Post:
5. Names of previous stations in such post:(Mention the name of the district)
 - a. Place of Posting From To
 - b. Place of Posting From To
6. Last uninterrupted contractual service in the same post under the Society:
(Mention the name of the district)
 - a. Place of Posting From To
 - b. Place of Posting From To
7. Father's Name:
8. Date of Birth:
9. Category (ST/SC/SEBC/UR):
10. Present Address:
.....
11. Permanent Address:
.....
12. Telephone No:
13. Email Id:

Enclosure:

- (1) NOC with continuation Certificate and Experience Certificate if any in same post under NHM issued by concerned CDM&PHO.
- (2) Caste Certificate issued by Competent Authority.

(Signature of the Applicant)

Declaration by the Candidate

I do hereby declare that the information furnished above are true to the best of my Knowledge and belief and that, if any stage, it is found that any of the above material information is false/incorrect or is suppressed by me, my candidature/appointment under Odisha State Health & Family Welfare Society (OSH&FWS), Odisha is liable to be rejected/terminated.

Full Signature of the Applicant