APPLICATION FORM

Post Applie	d for						
Willing to v	vork in (Location Pre	eference): -			Photog	graph	
1	22	3					
Day		thlyOr (S	uper Specialis	st/ Specialist	only) Per		
	In Block Letters)	2 District/State of Dom	icile		4. Sex:		
2. Date of	2. Date of Birth:- 3. District/State of Domicile					i. sen.	
5. Perman	nent Address: -	et.			6. Permane Phone N		
Correspondence Address: -						7. Present Phone No.:-	
8. Email	ID :-	3.00					
9. Langu	age Spoken :-						
10. Langu	age Written:-						
11. Educa	tion: High Schoo	l (Class 10 th) onwards, P	lease list all	your qual	ifications		
Exam	Board or	Name of the institution		Marks			
Passed	University	and location	Passing	Full Mark	Marks Secured	%	

12. Total Years of Experie	ence					
13. Years of Experience in C	Government Sector: -					
(Applicants terminated or on	unauthorized absence from Govt. service are not allowed for					
interview/ engagement)						
14. Details of employmen	at (use Separate Sheets if required)					
Starting with present of	employment, List in reverse order all the employments you					
have had	•					
15. A. Current Employmen	nt:					
Period	Designation Held					
G.	9					
e e						
Location of Employment						
Description of duties rendere	ed:					
15.B. Previous Employme	nt					
Period	Designation Held					
	*					
20						
	8					
Location of Employment						
Description of duties rendered	ed:					
Description of duties remain						
1						
Declaration: - I hereby decl	are that all the information furnished above are correct to the best					
of my Knowledge & brief and that, if any stage, it is found that any of the above information						
is false/ incorrect or is suppressed by me, my candidature/ engagement is liable to be rejected/						
terminated.						
terminated.						
Date :-	Signature of the Applicant					
Date	Digitatal Of the Lipping					

Vacant position in DHH/RGH/SDH/CHCs

		vacant	hogina	<u> </u>	/1111/10	GII/DL		105		
SI. No	Name of Institution	Block	Medicine	0& G	Pediatrics	Surgery	Orth.	Anesthesia	MBBS	Total
1	DHH,Sundargarh	Sadar	0	0	0	1	1	1	26	29
2	RGH, Rourkela	Rourkela	1	0	2	2	2	0	5	12
3	Panposh UCHC	Rourkela	0	0	1	0	1	0	0	2
4	Hemgir CHC	Hemgir	1	0	0	0	1	0	4	6
5	Sargipali CHC	Lephripara	0	1	1	0	1	0	4	7
6	Mangaspur CHC	Tangarpali	1	1	0	0	0	0	1	3
7	Majhapara CHC	Sadar	1	0	1	0	1	0	2	5
8	Kinjirkela CHC	Balisankara	0	0	1	0	1	0	0	2
9	Subdega CHC	Subdega	1	0	1	0	1	0	1	4
10	Bargaon CHC	Bargaon	0	1	1	0	. 0	0	0	2
11	Ekma CHC	Bargaon	1	0	1	0	0	0	0	2
12	Kutra CHC	Kutra	0	0	1	0	1	0	0	2
13	Laing CHC	Rajgangpur	1	0	0	0	1	0	2	4
14	Rajgangpur Hospital	Rajgangpur	0	0	0	0	1	0	0	1
15	Kuarmunda CHC	Kuarmunda	1	0	0	0	1	0	2	4
16	Biramitrapur Hospital	Kaurmunda	0	0	0	0	0	0	0	0
17		Nuagaon	0	0	1	0	1	0	0	2
18	Bisra CHC	Bisra	1	0	0	0	1	0	0	2
19	Birkera CHC	Lathikata	1	0	0	0	1	0	2	4
20	Koira CHC	Koira	0	1	1	0	1	0	0	3
21	Lahunipara CHC	Lahunipara	1	0	0	0	1	0	2	4
22	S.Balang CHC	Bonai	0	0	1	0	1	0	1	3
23	SDH, Bonai	Bonai	0	0	1	0	1	1	4	7
24	Gurundia CHC	Gurundia	0	0	0	0	1	0	2	3
	TOTAL		11	4	14	3	21	2	58	113