

ANDHRA PRADESH VAIDYA VIDHANA PARISHAD
RECRUITMENT NOTIFICATION No.06/2022, Dt.23.06.2022
UNDER THE CONTROL OF DCHS, VIZIANAGARAM
APPLICATION FORM

REGISTRATION NO:
 (TO BE FILLED BY THE OFFICE)

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POST FOR WHICH APPLICATION MADE

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1	Full name of the Candidate in Block Letters		Paste photograph here and sign across it								
2a	Full name of the Father										
2b	Name of the Mother										
2c	Full name of Husband in Block letters (with complete surname in capital letters)										
3	Sex	Male / Female									
4	Date of Birth										
5	Social status (Please tick)		OC	BC A	BC B	BC C	BC D	BC E	SC	ST	
6	Whether Physically handicapped (Please tick)	Yes	No								
6(a)	If yes please mention category (please tick)	VH	HH	OH	ID						
7	Ex-Servicemen	Yes			No						
8	Annual family Income if claim as Economically weaker section (EWS) (In case below 8 Lakhs)	Rs.	Certificate Enclosed								
			Yes			No					

DETAILS OF SCHOOL EDUCATION:

CLASS	YEAR OF PASSING	DISTRICT IN WHICH STUDIED
IV		
V		
VI		
VII		
VIII		
IX		
X		

STUDY CERTIFICATES FROM IVth TO Xth CLASS AT VIZIANAGARAM SHOULD BE ENCLOSED OTHERWISE RESIDANCE CERTIFICATE FOR 07 YEARS BEFORE THE 10th CLASS STUDY AT VIZIANAGARAM SHOULD BE SUBMITTED TO CONSIDER AS LOCAL.

MARKS OBTAINED IN THE ACADEMIC EXAMINATION:

Academic Examination	Total Marks	Marks Obtained	% of Marks obtained	Year of Passing

**MARKS OBTAINED IN ELIGIBLE QUALIFICATION EXAMINATION:
(TECHNICAL)**

Qualifying Examination	Total Marks	Marks Obtained	% of Marks obtained	Year of Passing

EXPERIENCE in Govt.Sector(including CoVID):

Sl. No	Name of the Govt. Institution	Experience		No of 06 months completed	No. of Days worked during COVID
		From	To		

ADDRESS PARTICULARS:

Name :
Father Name :
Husband Name :
House No. :
Street :
Village / Town :
District :
Pin :
Mobile Number :
2nd Mobile Number :
E-mail ID :

DECLARATION

I, Smt / Sri / Kum D/o / S/o / W/o certify that above particulars furnished by me are correct to the best of my knowledge. I also agree that in the event of any of the particulars furnished in my application being found to be incorrect or false at a later date my candidature will be cancelled summarily.

Signature of the candidate

ACKNOWLEDGEMENT

Received Application of Sri / Smt / Kum
_____ Resident of _____ for the
post of _____ with Regd.No. _____

Date:

Signature of the Officer

Please submit your application as per below Order:

Name of the Post Applying:

- 1. Application Form**
- 2. Caste Certificate**
- 3. 10th Class Marks List**
- 4. Intermediate Certificate**
- 5. Study Certificate (i.e., 4th to 10th class) / Residence Certificate for 7 years before 10th class study.**
- 6. Technical Eligible Qualification / Academic Eligible qualification Pass Certificates**
- 7. Technical Eligible Qualification/ Academic Eligible qualification Marks lists**
- 8. AP Paramedical Board Registration / RCI Registration certificate**
- 9. SADAREM Certificate**
- 10. Service Certificate in Govt. sector including CoVID service for service weightage with counter signature of appointing authority.**
- 11. EWS (Economically Weaker Section) Certificate**
- 12. Experience certificate**