APPLICATION FORM FOR THE POSTS OF AYUSH DOCTORS, PHARMACISTS & ANMS

Advertisement No				Personal Control	MATERIA S	Next north	
Name of the Post							Photograph
							Identity Proof No.
1. Applicant Name	1:						
2. Father's Name :					T.		
3. Date of Birth:	Date of Birth : 4. District o Domicile :				5. Sex :		
6. Age as on 01.12	.2020						
7. Present Contact	Address :						8. Contact Telephone No. :
Permanent Contact Address :					Mobile No.		
9. Email Address :			X-21	- 13-1			•)
10. Language spok							
11. Council Regd. I							
12. Professional Q	ualification (details :		D. 0	-111	4.1	
SI. No.	Exam Passed	Name of Board / University	Year of Passing	Marks (excluding 4th Optional)			
				Full Mark	Marks Secured	% of Marks	Duration of Course
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13.	Emr	lo	vment	Record	:-
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Total years of post qualification experience :-

14. Experience Details (Starting from present / last employment:-

Name of the Freedom	Post Held	From Data	To Doto	Total	
Name of the Employer	Post Heid	From Date	To Date	Year	Month
(Springer, F)					
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Declaration: I do hereby declare that the information furnished above are true to the best of my knowledge and belief and that, if at 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 (OHS&FWS), Odisha is liable to be rejected / terminated. I also declare that I have never been disengaged from service under the OSH&FWS, Odisha on administrative ground such as disobedience / poor performances/ misbehavior / criminal activity etc.

D-4-	-
Date	

Place:

Full Signature of the Applicant

List of Enclosure(s):-

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.7.

Note:

- 1. The following documents are to be enclosed along with the application:
 - a. Two copies of passport size colour self attested photographs. One copy of self attested photograph will however to affixed at the position in the application form.
 - b. Self attested photocopies of documents in support of age, qualification, experience, valid residence certificate, valid caste certificate etc.
 - Self attested photocopy of Identity Proof (Voter ID card / PAN Card / Driving License / Aadhar Card / Passport).
 - d. Other documents as per requirement.

COM EPHO, Kasaput