

<p>GOVERNMENT OF ANDHRA PRADESH</p> <p><u>SRI VENKATESWARA MEDICAL COLLEGE TIRUPATI /</u></p> <p><u>S V R R GOVERNMENT GENERAL HOSPITAL, GOVERNMENT SCHOOL OF NURSING,</u></p> <p><u>GOVERNMENT MATERNITY HOSPITAL, and</u></p> <p><u>SRI PADMAAVATHAMMA GOVT. COLLEGE OF NURSING TIRUPATI.</u></p>		
<p>Recruitment to the various posts to work on contract basis/Out Sourcing basis in Govt. Health facilities</p>		
<p>Application for the Post of :</p>	<div style="border: 1px solid black;"></div>	<p>Affix Pass port size latest Colour photograph</p>
<p>Application No.(to be filled by the office)</p>		

1	Name of the Candidate	
2	Gender	
3	Fathers Name / Husband Name	
4	Date of Birth(DD-MM-YYYY)	
5	Social Status (OC/OC-EWS/SC/ST/BC-A,B,C,D,E)	
6	Whether claiming for service weightage for Contract / Outsourcing service (enclose contract / outsourcing service certificate)	Yes / No
7	Whether Physically Handicapped (VH/HH/OH) (SADAREM Certificate to be closed)	
8	Whether claiming EWS reservation (copy of the certificate enclosed)	
9	Whether Ex-Servicemen (enclose Service Certificate)	Yes / No
10	Mobile number of the applicant	
11	DD particulars	<div style="display: flex; justify-content: space-between;"> DD.No. Date: Amount: </div>

12	<u>Address for communication:</u>

Marks obtained in the requisite Academic / Professional /
Technical qualification

Qualification	Maximum Marks	Marks obtained	Year of passing (Month & Year)	Whether registered in respective council (Yes/No)

Details of Contract/Outsourcing/Honorarium service as on. .12.2024:

Sl. No	Name of the Institution	Contract / Out-sourcing	Urban /Rural / Tribal(or) Covid-19	Period of service		Total period (Years–Months–Days)	Service certificate issued by the competent authority enclosed (yes/no)
				From	To		

Details of School studies from 4thClass to 10thClass (for local status):

Sl. No	Class	Year of passing	Name of the School	Town and District
1	IV			
2	V			
3	VI			
4	VII			
5	VIII			
6	IX			
7	X			

DECLARATION

I, Smt/Kum/Sri.....D/o or S/o or W/o.....do
hereby declare that, above particulars furnished by me are true to the best of my
knowledge. I agree that in the event of any of the details furnished above being
found to be incorrect or false at a later date, my candidature will be forfeited
summarily.

Signature of the applicant

::CHECKLIST::

S.No	Enclosure	Status
1	Marks memo of SSC (or) equivalent certificate	Yes/No
2	Latest caste certificate (in case of SC/ST/BC)	Yes/No
3	Latest EWS (Economically Weaker Sections) certificate issued by the competent authority in case of EWS categories	Yes/No
4	Latest physically handicapped certificate issued in sadarem.	Yes/No
5	Ex-service men / women in armed forces certificate (if applicable)	Yes/No
6	Study certificates from Class-IV to X where the candidate studied.	Yes/No
7	Marks memos of all the years of qualifying examination	Yes/No
8	Provisional/Permanent certificate of qualification	Yes/No
9	Permanent registration certificate of A.P.Para Medical Board/other concerned Council related to the post .	Yes/No
10	Service certificate issued by the concerned government departmental institution head (if applicable)	Yes/No
11	Latest passport size photograph of the applicant was affixed with attestation	Yes/No
12	Online Transaction Receipt of Application fee drawn in favour of College Development Society, S.V. Medical College, Tirupati enclosed	Yes/No

Signature of the applicant