ADMINISTRATION OFDAMAN AND DIU, U.T NATIONAL AYUSH MISSION DTE. OF MEDICAL & HEALTH SERVICES MOTI DAMAN – 396 220

No.1/DD/SAAP/NAM/2018-19/

Dated:08/08/2018

ADVERTISEMENT

National AYUSH Mission, Daman and Diu, conducts walk-in-interview on 1st September **2018** at 11.00 A.M for the posts of Pachkarma Technician (Female) / Yoga Instructor / Accountant to be filled on Short Term Contract Basis under National AYUSH Mission

| SI. | | No. of | Tradit Tratione | onal AYUSH Mission. | | | | |
|-----|-----------------------------------|--------|-------------------------------|---|------------------------|--|--|--|
| No. | Name of Post | vacan | Age | Qualification | Consolidated Salary | | | |
| 01. | Pachakarma Technician (Female) | 01 | Not exceeding 35 years. | Essential: a) Diploma or certificate course in Panchakarma of minimum one year duration from recognized Institution. b) One year experience in a recognized Ayurvedic Hospital / Institution. | Rs. 20,000/- | | | |
| 02. | Yoga Instructor | 01 | Not exceeding 35 years. | Essential: Degree/Diploma in Yoga from recognized institution/ University, OR Graduate in any stream with certificate course in Yoga. Desirable: One-year experience in a recognized Ayurvedic in a recognized Hospital / institution. | Rs. 18,000/- | | | |
| 03 | Accountant | 01 | | Essential: (1) B.com graduate from any recognized university. (2) Certificate in Computer Course of at least six months duration from a recognized institute. (3) Certificate in the course of TALLY Accounting Software from a recognized institute | Rs. 18,000/- | | | |

Candidates applying for the above posts will have to appear for walk-in-interview at Collectorate, Dholar, Moti Daman with a copy of bio-data and original certificates of their educational qualification and experience along with photo copy of the certificates self attested.

Candidates appearing for the interview shall report at 9.00 A.M sharp on 1st September 2018 for their document verification. Person who has been previously terminated from any Government Organization shall not be considered. All eligible qualification Diploma / Degree / Masters must be from a recognized university / college / council by Government of India. No TA/DA shall be paid for attending the interview.

NOTE:

- Candidates holding Domicile Certificate of Daman & Diu will be given preference.
- Age relaxation shall be considered for qualified and experienced candidates.

Contact No. (0260) 2230470

(Dr. V. K. Das) Director

APPLICATION FORM DIRECTORATE OF MEDICAL & HEALTH SERVICES UT OF DAMAN & DIU

(Candidate is requested to bring this filled application form at the time of registration. No need to send physical copy in advance)

| Name of Post applie | d for |
|---------------------------------|---|
| Name of candidate (| in block letters) |
| Father's name: | |
| Address for commur | ication: |
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| | Mobile No |
| E-mail address : | |
| Date of birth: | (attested copy of valid Proof should be enclosed) |
| Age (as on 01 /09/2018) | Years Months Days |
| Category | ST / SC / OBC / Others (attested copy of valid Proof should been closed) |
| Domicile of Daman & Diu | : Yes / No. (attested copy of Domicile Certificate issued by Mamlatdar, Daman & Diu should be enclosed) |
| Language Known : | |
| Marital Status: | Married Unmarried |

Educational Qualification:

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| Academic | Name of | Board/ | Stream/ Special Subjeçt | Year of | Percentage |
| | School/College | University | l Subject | Passing | |
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Work Experience:

| Sr. No. Designation | Designation | Omenination | Duration | | | Nature of |
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I hereby declare that all the statements made by me in the application form and information sheet are true and complete to the best of my knowledge and belief. I also understand that in case, any of my statements is found untrue during any stage of recruitment and thereafter, I shall be disqualified for the post applied for and I shall be liable for any penal action.

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Place:

Signature of candidate

- Attested Copies of Relevant Certificate / Documents should be attached along with application form
- Please bring filled copy of the same at the time of inverview.