



संघ प्रदेश दादरा नगर हवेली एवं दमण एवं दीव प्रशासन  
U. T. Administration of Dadra Nagar Haveli and Daman & Daman,  
चिकित्सा अधीक्षक का कार्यालय / O/o. The Medical Superintendent,  
सरकारी अस्पताल, मरवड, दमण / Government Hospital, Marwad, Daman.  
PH.NO.0260-2254266  
EMAIL ID: ghddmn@gmail.com

No.GHD/DMN/RKS/Advertisement/2020-21/2958

Dated:04.02.2021

Rogi Kalyan Samiti, Government Hospital, Daman invites application from eligible candidates for below mentioned posts to be filled on Short Term Contract Basis under Rogi Kalyan Samiti, Government Hospital, Daman. The application should reach the undersigned on or before 24.02.2021.

Sr. No.	Name of Post	No. of Vacancy	Age	Qualification	Consolidated Salary
1	Dietician	1	Not Exceeding 30 years	<b>Essential:</b> (1) 10 + 2 Class pass with physics, chemistry and Biology (PCB) as main subject. (2) Three years B.Sc. Nutrition Course or 4 (four) Years Food Technology Course. <b>Desirable:</b> Experience of 1 year as Dietician	Rs.15,000/- per month

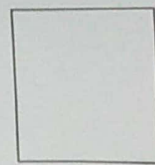
Eligible and desirous candidates may forward their application in prescribed format (download form website [www.daman.nic.in](http://www.daman.nic.in)) to the office of the Medical Superintendent, Government Hospital, Nani Daman, Daman – 396210, with one set of attested photocopies of educational qualification, experience certificate and identity proof. The application will be scrutinized by Department Selection Committee. The Candidates will be shortlisted based on selection criteria and shortlisted candidates will be called for interview.

**NOTE:**

1. Candidates holding Domicile Certificate of Daman & Diu will be given preference.
2. Only those candidates who are eligible will be contacted for interview.
3. No TA/ DA will be paid to the candidates for attending the interview.
4. Application will be summarily rejected if found deviant from prescribed format and required criteria without assigning any reason.
5. Member Secretary, Rogi Kalyan Samiti, Government Hospital, Daman reserves the right to terminate the selection process without assigning a reason.

(Dr. Sanjay Verma)  
Member Secretary, RKS  
Government Hospital, Daman

APPLICATION FORM  
ROGI KALYAN SAMITI,  
GOVERNMENT HOSPITAL, DAMAN



1. Name of post applied for: \_\_\_\_\_
2. Name of candidate (in Block Letters): \_\_\_\_\_
3. Father's Name: \_\_\_\_\_
4. Full Address: \_\_\_\_\_  
\_\_\_\_\_
5. Phone No. \_\_\_\_\_ Mobile No. \_\_\_\_\_
6. e-Mail Address: \_\_\_\_\_
7. Date of Birth: \_\_\_\_\_ (attested copy of valid proof should be enclosed)
8. Age (as on 24.02.2021): \_\_\_\_\_ Months: \_\_\_\_\_ Days: \_\_\_\_\_
9. Category: ST/SC/OBC (attested copy of valid proof should be enclosed)
10. Domicile: Yes/No. (Attested copy of Domicile Certificate is issued by the Mamlatdar, Daman & Diu should be enclosed).
11. Language known: \_\_\_\_\_
12. Marital Status: Married: ☐ Unmarried: ☐
13. Education Qualifications:

Academic	Name of School/ College	Board University	Stream/Special Subject	Year of passing	Percentage
S.S.C.					
H.S.C.					
Diploma in _____					
Graduation in _____					
Any other Please Specify					

14. Work Experience:

Sr. No.	Designation	Organization	Duration			Nature of duties
			From	To	Total Exp.	

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 undersigned that in case any of my statements if 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.

**Date:**

**Place:**

Signature of candidate