


List of Provisionally Eligible Candidates for Written Examination for Para Medical Worker (P.M.W.) post to be held on 06/11/2016 (Sunday) at Conference Hall, 2nd Floor, Primary Health Centre, Fort Area, Moti Daman from 10:00 p.m. to 12:00 noon. Candidates should remain present at 09:00 a.m. on Written Examination day for documents verification.

Those candidate who do not receive admit card / call letter are requested to download the format of admit card / call letter, instruction attached herewith, undertaking / declaration form also.

Sr. No.	Roll No.	Name of the Candidate
1	1	Suryakant Nagendra Tiwari
2	2	Ashish kumar Karuna Shankar Tiwari
3	3	Barot Ayodhyakumar Damodardas
4	4	Patel Riteshbhai Parsottambhai
5	5	Patel Vishal Rameshbhai
6	6	Patel Jigneshbhai Ashokbhai
7	7	Vankar Mehulkumar Mahendrabhai

Dated: 5/10/2016


(Dr. K. Y. Sultan)
Director
Dte. of Medical and Health Services
Daman and Diu

5/10/16

To

Sub: Recruitment for the post of Para Medical Worker (P.M..W.) reg..

Sir,

With reference to your application for the post of Para Medical Worker (P.M..W.) on the basis of advertisement No. DMHS/DD/PMW/2015-16/1716 dated 10/03/2016.

In this regard, you are requested to remain present on 06/11/2016 (Sunday) at 9:00 am, at Conference Hall, 2nd Floor, CHC Campus, Fort Area, Moti Daman, for Written Examination with the Admit Card and Undertaking / Declaration form duly filled in, Original and Photocopy of Identity Proof with Photograph duly attested by Self / Gazetted Officer (Voter ID / Adhar Card / Driving License / Pan Card) and all original Educational Certificates / Marksheets / documents, Caste Certificate (if applicable) with latest Non Creamy Layer Certificate (in case of OBC candidates) with one set of photo copies / Xerox copies duly attested by Self.

It is to inform you that your application has been scrutinized for your eligibility and the same has been accepted provisionally.

No candidate will be allowed to appear for the Written Examination without Admit Card and Undertaking / Declaration form duly filled in. Instructions are given overleaf. No T.A. / D.A. will be paid for attending the Written Examination.


 (Dr. K. Y. Sultan) 28/9/16
 Director

Dte. of Medical and Health Services
 Daman and Diu

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**U.T. Administration of Daman and Diu
 Directorate of Medical and Health Services
 Primary Health Centre, Moti Daman.**

ADMIT CARD

for the Written Examination for the post of Para Medical Worker (P.M.W.)

Candidate is required to self attest the photograph in such a manner that half of his signature comes on the body of admit card and rest comes on the photograph of candidate.

Please paste self
 attested passport
 size photograph

Roll No: _____

Date of Examination: 06/11/2016 (Sunday)

Time of Examination: 10:00 am to 12:00 noon

Name of the Candidate and Address:

Examination Centre:

Conference Hall, 2nd Floor, CHC Campus,
 Fort Area, Moti Daman,

Signature of the Candidate

Signature of the Invigilator

* To be signed in the presence of the Invigilator

Cont...2

UNDERTAKING / DECLARATION

I, _____ son of Shri. _____ hereby

declare that I have passed Diploma in Multi Purpose Health Worker (Male) Course:

- (i) On Full Time (Regular) basis
- (ii) Is not done on Part Time / Online / Distance Learning mode and
- (iii) Is passed from Institution / College / University, is recognized / approved by UCG / AICTE.

I, also hereby declare that all the above mentioned information made are true, complete and correct to the best of my knowledge belief. I understand that in the event of any information being found suppressed, false or incorrect or any Ineligibility being detected before or after the examination / recruitment, my candidature / recruitment / appointment is liable to be cancelled.



Signature of the Candidate