## CHANDIGARH ADMINISTRATION HEALTH DEPARTMENT VACANCY NOTICE

No.GH-II-2013/

Dated, Chandigarh the:

Applications on prescribed format stating full particulars i.e. Educational Qualification, and age etc. are invited from Indian Citizens for filling up of Two posts of Pharmacists (Group-C) in the Health Department, U.T., Chandigarh. The requisite qualification, , age, pay scale etc is given below:-

Sr.	Name of post &	Age	No. of posts	Category	Qualification	
No.	Pay Scale	As on 1-1-2013				
1	Pharmacist (regular) Rs. 10300- 34800+4200 G.P	18-28(For OBC Candidates only)	Two (02) The number of posts, however can be increased or decreased	O.B.C.=02	1.10+2 Medical or pre- Medical with one year Diploma in Pharmacy and Dresser's course from recognized institute. OR i). Matric with Physics and Chemistry. ii) Two year Diploma in Pharmacy and Dresser Course from recognized Institute or its equivalent. 2. Registered as Pharmacist with U.T. Chandigarh Pharmacy Council. 3. The practical training shall not be less than 500 hrs. spread over period of not less than three months provided that not less than 250 hrs. are devoted to actual dispensing of prescription.	

Fee:- Rs. 100/- for OBC Category in the shape of demand draft payable at Chandigarh in favour of Principal Medical Officer, GMSH-16, Chandigarh, (NOT REFUNDABE).

The application duly completed in all respect, with on latest Passport size photograph, (Format enclosed) should reach in the office of Director Health & Family Welfare, Govt. Multi Specialty Hospital, Sec-16, Chandigarh on or before 01-03-2013 by 3-00 P.M. The incomplete applications and applications received after the due date will not be entertained. The number of posts, however can be increased or decreased.

No TA/DA will be paid to the candidates for the test/interview etc.

Director Health & Family Welfare-cum-, Principal Medical Officer, Chandigarh Administration.

		OR THE POST OF _ Capital Letters)				
1.	Name of	the applicant (in Bloom				
2.	Father/H	Iusband's Name				
3.	(i) Date	of Birth (in Christian				
	(ii) Age	as on 01-01-2013	Years	Months	Days	
4.	(a) Perm	anent Address (with F				
	(b) Corre	phone No.)				
5. 6.		No. / Phone No., If any				
Sr.N	Board/	Name of	Year of	Total	Marks	Division/Percentage
0.	Institution	Board/University	Passing	Marks	Obtained	_
7. 8. 9.	Nationali Category Name of t	itythe Bank	N	0		
eligib	of my knowled	ge and belief. In the	event of any	informati	on being four	n is true and correct to the nd false or incorrect or in- y claims for the recruitment
	<u> </u>					Signature of Applicant