

### Odisha State Health & Family Welfare Society, Govt. of Odisha Deptt. of Health & Family Welfare, Govt. of Odisha Annex Building of SIH&FW, Nayapalli, Unit-8, Bhubaneswar-751012, District-Khordha (Odisha) Phone/Fax: 0674- 2392480/79



Adv. No.: 46/17 Walk-in- Interview Date: 08.12.17

Walk-in-Interview will be conducted as scheduled below for filling up the following posts for Programme Management Unit (PMU) under Universal Eye Health Programme (UEHP) under OSH&FW Society on contractual basis with monthly remuneration as noted against each and subject to renewal as per OSH&FW Society terms and conditions. The above positions are purely temporary and co-terminus with the scheme. Lower age limit for all the post is 21 years as on **dt 01.12.2017** 

| Sl. No. | Name of the Post        | Remuneration (in Rs.), Performance<br>Incentive & other allowances as<br>admissible | Date of Registration /<br>Interview |
|---------|-------------------------|---|-------------------------------------|
| 01      | Programme Manager, UEHP | Rs. 50, 300/-+PI  | 22.12.2017                          |
| 02      | Accounts Manager, UEHP  | Rs. 44,000/- + PI   | 23.12.2017                          |

Interested candidates can log on to <a href="www.nrhmorissa.gov.in">www.nrhmorissa.gov.in</a> for details of vacancy, eligibility criteria, Age, Application Form etc. Candidates fulfilling the eligibility criteria may appear for registration and consequently for interview if eligible, on the date as mentioned against each post. **Registration timing will be from 10.30 A.M. to 12 Noon only on Walk-in-Interview dates.** No application will be received after scheduled timing of registration.

<u>Venue:</u> Mission Directorate (National Health Mission), Annex Building of SIH&FW, Nayapalli, Unit-8, Bhubaneswar, Dist.- Khordha, Pin – 751012, Odisha.

Sd/-Mission Director, NHM Member Secretary, OSH&FWS, Odisha



### Odisha State Health & Family Welfare Society, Govt. of Odisha Deptt. of Health & Family Welfare, Govt. of Odisha Annex Building of SIH&FW, Nayapalli, Unit-8, Bhubaneswar-751012, District-Khordha (Odisha) Phone/Fax: 0674- 2392480/79



#### Date:08.12.17 Adv. No.: 46/17 Walk-in- Interview

Walk-in-Interview will be conducted as scheduled below for filling up the following posts for Programme Management Unit (PMU) under Universal Eye Health Programme (UEHP) under OSH&FW Society on contractual basis with monthly remuneration as noted against each and subject to renewal as per OSH&FW Society terms and conditions. The above positions are purely temporary and co-terminus with the scheme. Lower

| age III | mit for all the p | ost 18 21 | years as on <b>at u</b> | 1.12.17 |
|---------|-------------------|-----------|-------------------------|---------|
|         |                   |           | Remuneration            |         |

| age li     | mit for all the p             | ost is 21                | years as on <b>dt 0</b>   | <u>1.12.17</u>                         |         |   |
|------------|-------------------------------|--------------------------|---|--|---------|---|
| Sl.<br>No. | Name of the<br>Post           | Age as<br>on<br>01.12.17 | Remuneration (in Rs.), Performance Incentive (P.I) & other allowances as admissible | Date of<br>Registration<br>/ Interview | Vacancy | Eligibility Criteria  |
| 01         | Programme<br>Manager,<br>UEHP | Upto<br>40<br>years      | Rs. 50, 300/-<br>+PI  | 22.12.17                               | 01      | (I)Master Degree or Post Graduate Diploma in Business Administration or Business Management or Management or Personnel Management or Rural Management.  OR  (II)Master Degree in Sociology or Psychology or Anthropology or Social Work or Health Administration or Health Management.  All the above qualifications must be from any recognized University or Institution with minimum 60% marks and must be of two years duration.  Experience-S/he must have 5 years post qualification managerial experience in health or social or developmental sector in either Government or Government aided project, out of which 2 years must be at the State level. The candidates are required to exhibit requisite documents to clearly establish their eligibility as mentioned above. |
| 02         | Accounts<br>Manager,<br>UEHP  | Upto<br>40<br>years      | Rs. 44,000/-<br>+ PI  | 23.12.17                               | 01      | Inter CA/ Inter ICWA from institute of Chartered Accountants of India / Institute of Cost Accountants of India respectively, having 01 year post qualification experience in accounting. The candidates are required to exhibit requisite documents to clearly establish their eligibility as mentioned above.  |

# <u>Venue:</u> Mission Directorate (National Health Mission), Annex Building of SIH&FW, Nayapalli, Unit-8, Bhubaneswar, Dist.- Khordha, Pin – 751012, Odisha.

### General information and Instructions:-

- i. Candidates fulfilling the eligibility criteria may appear for registration in between **10.30 A.M. to 12 Noon** and consequently for interview if eligible, on the date as mentioned against each post. No registration will be allowed in any case after scheduled time of registration. After shortlisting basing on the required eligibility criteria, the candidates will be required to stay back for interview. If the number of candidates registered and shortlisted will be high, then the interview will be continued for other date/s, which will be notified to the candidates on the date of registration.
- ii. Candidates are required to come for interview with duly filled in application in prescribed format, available in the official website: www.nrhmorissa.gov.in and bring all certificates / testimonials, in original and a set of self attested photocopies of the same, in support of age, qualification and experience, for verification. Candidates are also required to bring two recent passport size colour photographs and self photo ID proof (Voter ID card / PAN card / Driving License / Aadhar card / Passport). Incomplete application in any form will be rejected.
- iii. Details of vacancy, eligibility, ToR, age, application form etc. can be downloaded from the official website (www.nrhmorissa.gov.in).
- iv. In case the marks obtained are in the form of CGPA, OGPA, DGPA, GPA, CPI etc., a certificate for conversion as applicable to percentage of marks shall be submitted at the time of submission of application form. Certification towards AICTE / UGC recognition of Institutions / Universities shall also be submitted at the time of submission of application form, wherever applicable, without which the application shall not be considered & shall be rejected.
- v. Over aged and under qualification in the prescribed educational qualification shall be rejected.
- vi. Candidates, who are already working in Health Department either on regular or on contractual basis, have to submit **No Objection Certificate** (**NOC**) from the employer (appointing authority) at the time of interview, without which they will not be eligible for appearing interview. NOC issued by any other authority other than appointing authority will not be accepted. NOC must be specific for the post, S/He applying and must be issued subsequent to issue of the advertisement.
- vii. If any candidate is found to have suppressed any material information or furnished false information / documents, his/her case shall not be considered for the post applied for and in case already engaged on the basis of the said information / documents, his / her service shall be terminated from the Society forthwith. Candidates who have been disengaged earlier from the OSH&FW Society on administrative ground such as disobedience / poor performances/ misbehavior/ criminal activity etc. are not eligible.
- viii. No personal correspondence / queries will be entertained. All communication will be made through e-mail / official website / Notice Board. Canvassing in any form will render the candidate disqualified for the position.
  - ix. The panel for above positions shall also remain valid for similar post / in other programmes under NHM ambit with same educational qualification and same remuneration, as will be decided by the Society.
  - x. Number of vacancies / remuneration as mentioned under this advertisement may vary at the time of actual engagement.
  - xi. The undersigned reserves the right to cancel any or all the applications / positions at any stage of recruitment process without assigning any reason thereof.
- xii. The result of walk-in-interview will be published in the **official website of NHM**.

Sd/-

Mission Director, NHM Member Secretary, OSH&FWS, Odisha.

## APPLICATION FORM

| Adve   | rtisement No.          |                       | 46/17   |                          |               |       |               | Photograph  |  |
|--------|------------------------|-----------------------|---------|--------------------------|---------------|-------|---------------|-------------|--|
| Name   | e of the Post          |                       |         |                          |               |       | Identity Pro  | oof No.     |  |
| 1. Ap  | plicant Name           | :                     |         |                          |               |       | l             |             |  |
|        | her's Name:            |                       |         |                          |               |       |               |             |  |
| 3. Da  | te of Birth:           |                       |         | 4. District of Domicile: | of            | 5. S  | ex:           |             |  |
| 6. Ag  | e as on <b>01.12</b> . | .2017                 |         |                          |               |       |               |             |  |
| Perma  | anent Contact          | Address:              |         |                          |               |       | ontact Telep  |             |  |
| 9. Em  | nail Address:          |                       |         |                          |               |       |               |             |  |
| 10. La | anguages spol          | ken/written:          |         |                          |               |       |               |             |  |
| 11. P  | rofessional Q          | ualification details: |         |                          |               |       |               |             |  |
| S1.    | Exam                   | Name of Board /       | Year of |                          | xcluding      | g 4tł | optional)     | Duration of |  |
| No.    | Passed                 | University            | passing | Full<br>Mark             | Mark<br>Secur |       | % of<br>Marks | Course      |  |
|        |                        |                       |         |                          |               |       |               |             |  |
|        |                        |                       |         |                          |               |       |               |             |  |
|        |                        |                       |         |                          |               |       |               |             |  |
|        |                        |                       |         |                          |               |       |               |             |  |
|        |                        |                       |         |                          |               |       |               |             |  |

| Name of the Employer   | Post Held  | From  | To Date   | Total                                  |   |  |
|--|--|---|---|--|---|--|
| Name of the Employer   | 1 OSt 11eIu  | Date Date   | 10 Date   | Year Month                             |   |  |
|  |  |   |   |  |   |  |
|  |  |   |   |  |   |  |
|  |  |   |   |  |   |  |
|  |  |   |   |  |   |  |
|  |  |   |   |  |   |  |
|  |  |   |   |  |   |  |
|  |  |   |   |  |   |  |
|  |  |   |   |  |   |  |
|  |  |   |   |  |   |  |
|  |  |   |   |  |   |  |
|  |  |   |   |  |   |  |
|  |  |   |   |  |   |  |
|  |  |   |   |  |   |  |
|  |  |   |   |  |   |  |
| _  |  |   |   |  |   |  |
| aration: I do hereby declar vledge and belief and that, it is a suppressed ly Welfare Society (OSH&I never been disengaged from bedience / poor performances | f at any stage, it is to the state of the st | found that and lature / apportude to be rejusted SH&FWS,C | ny of the abore ointment under ected / termino disha on adm | ve materia<br>er Odisha<br>ated. I als | al information<br>State Healt<br>so declare the |  |

### Note:

- 1. The following documents are to be enclosed along with the application:
  - a. Two copies of passport size colour self attested photographs. One copy of self attested photograph will however to affixed at the position in the application form.
  - b. Self attested photocopies of documents in support of age, qualification, experience etc.
  - c. Self attested photocopy of Identity Proof (Voter ID card / PAN card / Driving License / Adhar card / Passport).