

NOTIFICATION
GOVERNMENT OF ANDHRA PRADESH
ANDHRA PRADESH VAIDYA VIDHANA PARISHAD.
NOTIFICATION FOR RECRUITMENT OF STAFF NURSES, PHARMACIST GR – II AND LAB
TECHNICIAN ON CONTRACT BASIS
Notification No.

Applications are invited from qualified and eligible candidates for filling up of the post of Staff Nurses , Pharmacist Gr – II and Lab Technician on Contract basis, initially for a period of six months in various institutions in Health Medical & Family Welfare Department, Government of AP (A.P.V.V.P.,)

I. The post –wise Vacancies, Qualifications & Age are as follows:

Sl No	Name of the Category	No of Posts	Qualification	Roster	Age
1	Staff Nurse	67 Posts of Staff Nurses:	Intermediate with GNM/BSC Nursing/MS Nursing, AP nursing council registration.	As per Roster.	Maximum age: 42 Years for OC and 5 years relaxation for upper age limit for SC/ST/BC and 3 years for Ex-Service Men and 10 years for Physically Handicapped persons up to a Maximum for 45 years. The maximum age shall be reckoned as on 01.06.2020.
2	Pharmacist Gr – II	07 Posts of Ph Gr - II:	pharmacy/B.Pharmacy/ M. Pharmacy Govt./Govt Reg. Institutions which are Registered in AP Paramedical Board Registration, up to date renewal	As per Roster.	
3	Lab Technician	01 post of Lab technician:-	Inter Vocational MLT/DMLT/B.Sc.MLT Govt/Govt.reg. Institutions which are Registered in AP Paramedical Board renewal.	SC(W)	

Note: The above posts are filling up in the A.P.V.V.P., institution available vacancies as Need basis.

II. RECRUITMENT SCHEDULE:

1	Date of Issuing of Notification	28.06.2020
2	Last Date for receipt of applications	22.07.2020
3	Publication of Provisional merit list	06.08.2020
4	Last date for receipt of Grievances	10.08.2020
5	Redressal of Grievances and publication of final merit list	13.08.2020
6	Counseling for Staff Nurses.	

1	Filled-in Application form
2	Attested copy of marks memo of SSC (or) equivalent certificate
3	Attested copies of Marks memos of all years and Provisional Certificates, Internship Certificate and Permanent Registration of APMC
4	Attested copy of latest caste certificate (in case of SC/ST/BC)
5	Attested copies of study certificates from Class-IV to X where the candidates studied.
5	Attested copy of latest Physically handicapped certificate (if applicable)/ Ex-Servicemen
6.	The Experience Certificate on Contract/Out Sourcing should be enclosed

d) For any Correspondence: 08942 – 223308, available timings from 11.00AM to 4.00PM.

e) Every candidate should wear mask.

Note:

- i) If attested copies of Caste certificate / Physically handicapped certificate / Ex-Servicemen are not enclosed, the candidate will be treated under OC.
- ii) If the certificate copy of Residence of the study certificate is not enclosed the candidates will be treated as Non-Local
- iii) If attested copies of the above are not enclosed, the application will be summarily rejected
- iv) Application shall be submitted in the format enclosed to these guidelines only.

IV. CONDITIONS ON APPOINTMENT:


The candidate selected and appointed on contract basis shall not be regarded as a member of the service in which the post to which he/she is appointed, is included, and shall not be entitled by reason only of such appointment, to any preferential right to any other appointment in that or any other service. The department or the person may revoke the contractual appointment or discontinue the contract by giving one month's notice in writing on either side. This contract would automatically cease to operate on lapse of contract period and both parties will be discharged of their respective obligations and liabilities without any formal communication.

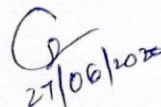
The merit List will be available in the **WEBSITE(www.srikakulam.nic.in)**

TENURE: Initially for a period of six months from date of joining in the post.

CONTRACT REMUNERATION:- The Salaries to the recruited staff have to be paid from APVVP., funds , as per G.O.Ms.No.27,Dt.16.03.2018

- | | |
|-----------------------|--------------|
| 1. Staff Nurse | - 34000/-pm. |
| 2. Pharmacist Gr – II | 28000/-pm |
| 3. Lab Technician | 28000/-pm |


 District Co-ordinator of Hospital
 Services, Srikakulam


 27/06/2020

GOVERNMENT OF ANDHRA PRADESH
RECRUITMENT OF STAFF NURSES PHARMACIST GR - II AND LAB TECHNICIAN
ON CONTRACT BASIS IN APVVP HOSPITALS: SRIKAKULAM DISTRICT

APPLICATION FORM

REGISTRATIN NO:
 (TO BE FILLED BY THE OFFICE)

POST FOR WHICH APPLICATION MADE

1	Name of the Candidate		Paste photograph here and sign across it																
2a	Name of the father																		
2b	Name of the Mother																		
2c	Name of Husband / wife (if married)																		
3	Sex																		
4	Date of Birth and age																		
5	Social status (Please tick)	<table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="padding: 2px;">OC</td> <td style="padding: 2px;">BC</td> <td style="padding: 2px;">BC</td> <td style="padding: 2px;">BC</td> <td style="padding: 2px;">BC</td> <td style="padding: 2px;">BC</td> <td style="padding: 2px;">SC</td> <td style="padding: 2px;">ST</td> </tr> <tr> <td></td> <td style="padding: 2px;">A</td> <td style="padding: 2px;">B</td> <td style="padding: 2px;">C</td> <td style="padding: 2px;">D</td> <td style="padding: 2px;">E</td> <td></td> <td></td> </tr> </table>	OC	BC	BC	BC	BC	BC	SC	ST		A	B	C	D	E			
OC	BC	BC	BC	BC	BC	SC	ST												
	A	B	C	D	E														
6	Whether Physically handicapped (Please tick)	Yes / NO																	
6(a)	If yes please mention category (please tick)	HH / OH / VH																	
7	Whether Ex-Service man / Women	Yes / No																	

DETAILS OF SCHOOL EDUCATION:

CLASS	YEAR OF PASSING	DISTRICT IN WHICH STUDIED
IV		
V		
VI		
VII		
VIII		
IX		
X		

STUDY CERTIFICATES FROM IVth TO Xth SHOULD BE ENCLOSED OTHERWISE CANDIDATE WILL BE TREATED AS NON-LOCAL

EDUCATIONAL QUALIFICATIONS:

QUALIFICATION	YEAR OF PASSING	NAME OF THE COLLEGE / UNIVERSITY

MARKS OBTAINED IN THE QUALIFYING EXAMINATION:

Qualifying Examination	Total Marks	Marks Obtained (MBBS/PG)	% of Marks obtained

ADDRESS PARTICULARS:

Name :
Father Name :
Husband Name :
House No. :
Street :
Village / Town :
District :
Pin :
Cell No. / Phone No. :

DECLARATION

I, Smt / Sri / Kum D/o / S/o / W/o
..... certify that above particulars furnished by me are correct to the best of my
knowledge. I also agree that in the event of any of the particulars furnished in my application being
found to be incorrect or false at a later date my candidature will be cancelled summarily

Name and Signature of the
candidate