



ଅଂଗୁଳ ଜିଲ୍ଲାର ମିନିଂଗ୍ ଆଞ୍ଚଳିକ ସମାଜିକ ଉନ୍ନତି ଓ ସୁସ୍ଥିତି
Development and Welfare of Mining Affected Areas & People

District Mineral Foundation Trust, Angul



**NOW HIRING
DOCTORS**

**We Are Looking for
Professional Individuals
to Join Our Team**

- ❖ O & G Specialist
- ❖ Pediatrics Specialist
- ❖ Medicine Specialist
- ❖ Surgery Specialist
- ❖ Psychiatric Specialist



- ❖ Anesthesia Specialist
- ❖ ENT Specialist
- ❖ Ophthalmic Specialist
- ❖ Pathology Specialist
- ❖ Orthopedic Specialist
- ❖ MO (MBBS)

Interested Candidates May Send Application in
Prescribed Format to cdmoang@gmail.com, at Any Point of Time
May Contact Following Persons Only in Working Days
and Working Hours (10am to 5.30pm)

CDM&PHO, Angul - 9439981331

Health & Livelihoods Expert, PMU, DMF- 8249192534

PD, DRDA, Angul- 9437102525

For More Details Please visit www.angul.nic.in

**Collector & Chairperson-Cum-
Managing Trustee, DMF, Angul**

DISTRICT MINERAL FOUNDATION, ANGUL
E-mail : cdmoang@gmail.com. Website – www.angul.nic.in

Adv. No. : 420

Date: 26/11/2019


Interested candidates fulfilling the eligibility criteria are requested to submit their bio-data in prescribed format (Annex - B) for the following posts in different Health Institutions of Angul District on contractual basis initially for a period of one year and subsequent renewal subject to satisfactory performance and subsistence of the programme.

Name of the Post	Qualification/Eligibility/Age	Remuneration
O & G Specialist	<ul style="list-style-type: none">▪ MBBS Degree from an Institute recognized by Medical Council of India with P.G. degree in concern subject from any recognized University/Institute.▪ He/She must have valid registration from the Odisha Council of Medical Registration. Age up to 68 years.	Negotiable
Paediatric Specialist		
Medicine Specialist		
Surgery Specialist		
Anaesthesia Specialist		
ENT Specialist		
Ophthalmic Spl		
Pathology Spl		
Orthopaedic Spl		
Psychiatric Spl		
MO (MBBS)	<ul style="list-style-type: none">▪ MBBS Degree from an Institute recognized by Medical Council of India▪ He/She must have valid registration no from the Odisha Council of Medical Registration. Age up to 68 years.	

The above positions are purely temporary & can be terminated at any point of time if Govt. fill-up the vacancy. Detail of qualification, experience and TOR of each category of post along with application form can be downloaded from the district website www.angul.nic.in. The number of post may increase/decrease depending upon requirement. The authority has the right to cancel any application without assigning any reasons thereof.

Instructions to the Candidates:

1. Candidate will be selected on the basis of selection process as applicable.
2. Candidates, who are already working in any organization (Govt/Private) on regular or on contractual basis, have to submit "No Objection Certificate" form the employer (appointing authority) at the time of attending the interview.
3. 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. Candidates who have been disengaged earlier from any Govt. Institution on administrative ground such as disobedience/poor performances/ misbehavior/criminal activity etc. are not eligible to apply.
4. Interested candidates may apply for any above mentioned post **at any point of time** as per their convenience with submission of bio-data along with annexure(A&B) and certificates by post to the CDM&PHO, Angul, Odisha – 759122


Collector & Managing
Trustee, DMF, ANGUL.

Annexure – A

Required Document to be submitted along with application form

- Two copies of self attested pass port size colour photograph.
- Self attested photocopies of all mark sheets/certificates relating to his/her educational qualification.
- Experience certificate if any.
- NOC from current employer.

Address for communication:

CDM&PHO, Angul, Odisha - 759122

APPLICATION FORM
(Appointment of Contractual Doctors / Specialists under DMF, Angul)

Post applied for :			Affix / Paste your recent Passport size Colour Photograph here			
1. Name of the Candidate: (IN CAPITAL LETTERS)						
2. Fathers/Husband Name:						
3. Date of Birth:	4. District of Domicile:	5. Sex:				
6. Please mention if SC/ST/OBC/General:						
7. Present Contact Address:			8. Permanent Telephone No: (STD Code) Number			
Permanent Contact Address:			9. Present Telephone No: (STD Code) Office Number			
10. Email Address :			11. Mobile No:			
12. Language Spoken/written:						
13. Education : High School onwards , please list all your qualifications						
Degree	Institute/Board & Location	Year	Mark			Full/Part Time/ Distance Learning
			Full Mark	Marks Secured	%	
Matriculation						
MBBS						
P.G (Specialisation)- Pl. mention-						
Other (Additional row may be added)						

14. Odisha Council of Medical Registration No, Date & Validity:		
15. Employment record:		
Total Years of post qualification experience:		
Years of experience in Government:		
16. Details of Employment: (Use separate sheets if required).		
Starting with your present employment, list in reverse order all the employments you have had.		
16 A. Current Employment:		
From Month/ Year	To Month/ Year	Designation
Location of Employment:		
Description of your duties:		
Current salary drawn	Rs. /Pm	
16 B. Previous Employment :		
From Month/ Year	To Month/ Year	Designation
Location of Employment:		
Description of your duties:		
Per month Salary Drawn: Rs.....		
Expected Remuneration (INR/Per Month):	Rs. :...../- PM (In words :.....)	
DECLARATION		
I do hereby declare that the information furnished above are true to the best of my knowledge and belief and if at any stage, it is found that any of the material/ information is false/incorrect or is suppressed by me, my candidature/appointment under DMF Trust is liable to be rejected/ terminated. I also declare that, I have never been disengaged under Health & F.W. Deptt., Govt. of Odisha on administrative ground for disobedience/poor performance/misbehaviour/criminal activities etc.		
Date:		
Place:		
		Signature of the Applicant