



ଅନୁଗୋଳ  
 ଶକ୍ତି ପ୍ରଦାନିତ ଅଞ୍ଚଳ ଓ ଲୋକଙ୍କ ବିକାଶ ଓ କଲ୍ୟାଣ  
 Development and Welfare of Mining Affected Areas & People

# District Mineral Foundation, Angul



**NOW HIRING  
 DOCTORS**

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

|                        |          |                        |           |
|------------------------|----------|------------------------|-----------|
| O & G Specialist       | : 2 No.  | Anesthesia Specialist  | : 3 Nos.  |
| Pediatrics Specialist  | : 5 Nos. | ENT Specialist         | : 1 No.   |
| Medicine Specialist    | : 4 Nos. | Ophthalmic Specialist. | : 4 Nos.  |
| Surgery Specialist     | : 7 Nos. | Pathology Specialist   | : 3 Nos.  |
| Psychiatric Specialist | : 1 No.  | Orthopedic Specialist  | : 2 Nos.  |
|                        |          | MO (MBBS)              | : 40 Nos. |

**Send Application To  
 DMF Cell, DRDA Angul, Pin: 759122, Odisha  
 Or [dmfangul@gmail.com](mailto:dmfangul@gmail.com)**

**Last Date  
 31.08.2019**

**For More Details Please visit [www.angul.nic.in](http://www.angul.nic.in)**

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

**DISTRICT MINERAL FOUNDATION,  
ANGUL Ph.- 06764 - 230745**

E-mail : [dmfangul@gmail.com](mailto:dmfangul@gmail.com), Website – [www.angul.nic.in](http://www.angul.nic.in)

Adv. No. : 291

Date: 23/07/2019

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       | Vacancy | Qualification/Eligibility/Age   | Remuneration |
|------------------------|---------|---|--------------|
| O & G Specialist       | 2       | <ul style="list-style-type: none"><li>▪ MBBS Degree from an Institute recognized by Medical Council of India with P.G. degree in concern subject from any recognized University/Institute.</li><li>▪ He/She must have valid registration from the Odisha Council of Medical Registration. Age up to 68 years.</li></ul> | Negotiable   |
| Paediatric Specialist  | 5       |   |              |
| Medicine Specialist    | 4       |   |              |
| Surgery Specialist     | 7       |   |              |
| Anaesthesia Specialist | 3       |   |              |
| ENT Specialist         | 1       |   |              |
| Ophthalmic Spl         | 4       |   |              |
| Pathology Spl          | 3       |   |              |
| Orthopaedic Spl        | 2       |   |              |
| Psychiatric Spl        | 1       |   |              |
| MO (MBBS)              | 40      | <ul style="list-style-type: none"><li>▪ MBBS Degree from an Institute recognized by Medical Council of India</li><li>▪ He/She must have valid registration no from the Odisha Council of Medical Registration. Age up to 68 years.</li></ul>  |              |

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](http://www.angul.nic.in). Candidates are requested to refer the district official website on regular interval till finalization of the recruitment process. The number of post may increase/decrease depending upon requirement. All official communications will be made through email. The undersigned reserves the right to modify the selection criteria as per requirement. Besides the authority has the right to cancel any or all the 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 are requested to submit their bio-data along with annexure and certificates to E-mail ID – [dmfangul@gmail.com](mailto:dmfangul@gmail.com) or by post to DMF Cell, DRDA, Angul, Odisha – 759122.
5. The last date for receipt of application in prescribed format is 31.08.2019.

  
Collector & Managing  
Trustee, DMF, ANGUL.

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.

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

| Post applied for :  |                               |         | Affix / Paste your recent<br>Passport size Colour<br>Photograph here |                  |   |  |
|---|-------------------------------|---------|--|------------------|---|--|
| 1. Name of the Candidate:<br>(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:<br>(STD Code) Number                      |                  |   |  |
| Permanent Contact Address:  |                               |         | 9. Present Telephone No:<br>(STD Code)<br>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<br>& Location | Year    | Mark   |                  |   | Full/Part<br>Time/<br>Distance<br>Learning |
|   |                               |         | Full<br>Mark   | Marks<br>Secured | % |  |
| Matriculation   |                               |         |  |                  |   |  |
| MBBS  |                               |         |  |                  |   |  |
| P.G (Specialisation)-<br>Pl. mention-                                     |                               |         |  |                  |   |  |
| Other (Additional row may be<br>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<br>Month/ Year | To<br>Month/ Year | Designation |
|---------------------|-------------------|-------------|
|                     |                   |             |

Location of Employment:

Description of your duties:

Current salary drawn Rs. .... /Pm

16 B. Previous Employment :

| From<br>Month/ Year | To<br>Month/ Year | Designation |
|---------------------|-------------------|-------------|
|                     |                   |             |

Location of Employment:

Description of your duties:

Per month Salary Drawn: Rs.....

|  |                                      |
|--|--------------------------------------|
| Expected<br>Remuneration<br>(INR/Per Month): | Rs. :...../- PM<br>(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