



**THE ADMINISTRATION OF UNION TERRITORY OF LADAKH
LADAKH AUTONOMOUS HILL DEVELOPMENT COUNCIL KARGIL
OFFICE OF THE CHIEF MEDICAL OFFICER KARGIL**

Advertisement Notice No:- 03 of 2021

Dated: 20.04.2021

Subject:- ADVERTISEMENT NOTICE UNDER COVID-19

As approved by the Deputy Commissioner/CEO LAHDC (Chairman District Health Society) Kargil vide his letter No,Estt-I/Engtt-COVID_19/2020 dated,15.04.2021, applications are invited on behalf of District Health Society Kargil for hiring of below mentioned category of posts on needs basis under COVID-19 emergency response and health preparedness package NHM 2021-22.

The application shall be addressed to the Chief Medical Officer Kargil on the prescribed form. Application form, advertisement details can be downloaded from the www.kargilnic.in. Interest candidate shall apply on the prescribed format and submit along with supporting documents which must reach the office of the **CMO Kargil within (07) Seven days from the date of advertisement** in view of the prevailing situation arising due to spread of Covid-19. **The candidates shall also submit their application by mail on cmokgl@gmail.com.**

S. No	Category of Post.	No of Posts	Qualification/ Experience.
01	Laboratory Assistant. Remuneration @ Rs.15000/P.M.	20	Matric with Diploma in Lab. Assistant Training Course from SMF or any other recognized Institute. Age up to 45 years.


Terms and Conditions:-

1. All the engagements are on Need Basis under Covid-19 emergency response and health preparedness package NHM Kargil Ladakh. The hiring shall be for the period, till the COVID activities are over in the district.
2. The appointee shall not be entitled to claim for regular appointment under normal process of selection.
3. If an appointee at any time willfully neglects or refuse to perform duty, his/her service shall immediately be terminated without serving any notice and he or she not be entitled to any honorarium for such period.
4. Local candidates shall be given preference.
5. Honorarium/ Remuneration will be paid as mentioned in the above as per NHM norms.
6. Applications incomplete in any respect shall not be entertained / accepted.

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List of documents to be attached with the application form:-

1. Date of Birth Certificate.
2. Degree/ Diploma of the required qualification for the post applied.
3. Marks sheet of all semesters/ one consolidated marks sheet indicating marks of all the semesters of the required qualification for the post applied for.
4. Domicile certificate/ Adhar card copy.


(Dr. Munawar Hussain Wazir)
Chief Medical Officer
Kargil.

NO:-CMO-K/Advert-Covid-19/2021/534-44

Dated: - /04/2021

1. Deputy Commissioner/CEO LAHDC Kargil (Chairman District Health Society) for information.
2. Director Health Services UT Ladakh for information.
3. Sub Divisional Magistrate Zanskar, Drass, Sankoo, Chiktan for information and request for vide publicity their respective Divisions.
4. Assistant Director Information Kargil for information with the request to kindly publish the notice in the local News Papers.
5. Medical Superintendent District Hospital Kargil for information.
6. Station Director All India Radio Kargil for information, with the request to kindly announce the contents through AIR for five consecutive days for information of the intending candidates.
7. District Informatics Officer Kargil for information with the request to kindly get the notice in the official web site of District Kargil for information of the candidates.
8. OSD to Commissioner Secretary Health and Medical Education Department Ladakh for kind information to the Commissioner Secretary.
9. PS to Hon'ble Chairman/Chief Executive Councilor LAHDC Kargil for kind information of the Hon'ble CEC.
10. PA to Hon'ble Executive Councilor Health LAHDC Kargil for kind information of the Hon'ble Ec.
11. Notice Board Bazar/ Baroo/ CMO Office Kargil.

APPLICATION FORM
State Health Society
NATIONAL HEALTH MISSION, J&K

1. Post applied for. _____
2. Name of Candidate _____
3. Parentage _____
4. Date of Birth _____
5. Address _____
District _____, Block _____
6. E-mail/ Contact No. _____
7. Details of Technical Qualification:



Examination passed	Examining Body/ Board/University	Year of passing	Marks obtained	Total marks	%age

8. Date of completion of qualifying degree _____
9. Post Qualification Experience :
Duration _____ years _____ Months
10. Documents enclosed:
a) _____ b) _____
c) _____ d) _____

11. I do hereby declare that
 - a) The Statements in this application are true to the best of my knowledge and belief.
 - b) I have never been debarred from appearing in any examination/interview.
 - c) I have never been arrested / prosecuted or involved in any criminal case registered by the police or convicted by the criminal court.
 - d) I have undergone the degree from University head-quarters and not from the off-campus which have been established by these Universities beyond their territorial jurisdiction (In case of Distance Mode).
 - e) I undertake that any wilful concealment of the facts shall result in the cancellation of my candidature and the State Health Society may also debar me from applying for future selection.

I shall accept the selection made by the selection committee which will be binding on me.

Signature of applicant

Note: The candidates need to attach documentary evidence along with the application form, which supports the statements made in the form.