Administration of Dadra & Nagar Haveli and Daman & Diu, U.T., Directorate of Medical & Health Services (Ayushman Bharat-Pradhan Mantri Jan Aarogya Yojana)

No.DMHS/AB-NHPM/StaffRecruitment/2018/548/1149

Silvassa

Date: 15/04/2025

<u>ADVERTISEMENT</u>

Directorate of Medical & Health Services, Dadra & Nagar Haveli and Daman & Diu, Silvassa invites application from eligible candidates for below mentioned post to be filled on Short term contract basis under Ayushman Bharat-Pradhan Mantri Jan Aarogya Yojana. The application should reach the undersigned on or before 28 104 12025.

Sr. No.	Name of Post	No. of Vaca- ncy	Age	Qualification	Consolida- ted Salary per month
1	IT Support cum Data Manager/IEC manager/ Capacity Development Manager	01 (For DNH)	Not Exceed -ing 35 years	i. B. Tech/ M. Sc in CS/IT/MCA ii. Minimum of 2 years of experience. iii. Experience in insurance industry IT system maintenance would be an advantage	30,000/-

Eligible and desirous candidates may forward their applications in the prescribed format (download from website) to the Office of the Additional CEO (AB-PMJAY), Medical & Health Services, DNH&DD, Silvassa-396230 before & Iby 12025, with one set of attested photocopy of educational qualification and experience certificate. Details regarding eligibility, Recruitment rules, Salary details and the prescribed format of application are available on the official website:www.dnh.gov.in or www.vbch.dnh.nic.in

Note:

- No TA/DA will be paid to the candidates for attending the interview.
- 2. Application will be summarily rejected if found deviant from the prescribed format and required criteria without assigning any reason

Contact No. :, (0260) 2642940

Website: www.dnh.gov.in

E-mail: AB-PMJAY - abpmjaydnhdd@gmail.com

(Additional CEO)

AB (PMJAY)

APPLICATION FORM DIRECTORATE OF MEDICAL & HEALTH SERVICES UT OF DADRA & NAGAR HAVELI AND DAMAN & DIU (AYUSHMAN BHARAT-PRADHAN MANTRI JAN AAROGAYA YOJANA)

Name of Post applied for
Name of candidate (in block letters)
Father's name:
Address for communication:
Phone no. : Mobile No
E-mail address :
Date of birth:(attested copy of valid Proof should be enclosed)
Age (as on 14 /04 /2025) Years Months
Category : ST/ SC/ OBC / Others (attested copy of valid Proof should been closed)
Domicile of D&NH : Yes / No. (attested copy of Domicile Certificate issued by Mamlatdar,
Language Known:

Educational Qualification:

Academic	Name of School/College	Board/ University	Stream/ Special Subject	Year of Passing	Grade/ Percentage
S.S.C			÷		
H.S.C					
Graduation in					
Post Graduation in					
Any other Please specify					

Work Experience:

Sr. No.	Designation	Organization	Duration			Nature of Duties
			From	То	Total Exp.	
	-					

I hereby declare that all the statements made by me in the application form and information sheet are true and complete to the best of my knowledge and belief. I also understand that in case, any of my statements is found untrue during any stage of recruitment and thereafter, I shall be disqualified for the post applied for and I shall be liable for any penal action.

Date:

Place:

Signature of candidate

- Attested Copies of Relevant Certificate / Documents should be attached along with application Form
- Incomplete or Unsigned Application will be rejected