

Last Date for Application: – 31 .03.2018

GOVERNMENT OF TELANGANA
HEALTH, MEDICAL & FAMILY WELFARE DEPT., RAJANNA SIRCILLA DIST.

NOTIFICATION NO. 01-2018/E1/RNTCP/2018

RECRUITMENT FOR THE POST OF _____ ON CONTRACTUAL
BASIS UNDER REVISED NATIONAL TB CONTROL PROGRAMME (RNTCP)

APPLICATION FORM

REGISTRATION NO:–
(TO BE FILLED BY THE OFFICE)

1.	Name of the Candidate		Paste Photograph here and sign across it							
2.	Name of the Father									
3.	Name of the Mother									
4.	Name of Husband/Wife (If married)									
5.	Sex									
6.	Date of Birth									
7.	Social Status (Please tick)	<table border="1"><tr><td>OC</td><td>BC A</td><td>BC B</td><td>BC C</td><td>BC D</td><td>BC E</td><td>SC</td><td>ST</td></tr></table>	OC	BC A	BC B	BC C	BC D	BC E	SC	ST
OC	BC A	BC B	BC C	BC D	BC E	SC	ST			
8.	Whether Physically handicapped (Please tick)	YES / NO								
8.(a)	If yes please mention category (Please tick)	HH / OH / VH								
9.	Whether Ex Serviceman/Woman	YES / NO								

DETAILS OF SCHOOL EDUCATION:–

CLASS	YEAR OF PASSING	NAME OF THE SCHOOL	NAME OF THE VILLAGE, MANDAL	DISTRICT IN WHICH STUDIED
IV				
V				
VI				
VII				
VIII				
IX				
X				

DISTRICT TO WHICH CANDIDATE BELONGS AS PER PRESIDENTIAL ORDER

EDUCATIONAL (1) & PREFERENTIAL (2) QUALIFICATIONS:

QUALIFICATION	YEAR OF PASSING	NAME OF THE COLLEGE/UNIVERSITY
(1)		
(2)		

MARKS OBTAINED IN THE QUALIFYING EXAMINATION

Qualifying Examination	Total Marks	Marks Obtained	% of Marks Obtained
Total			

ADDRESS PARTICULARS:

Name :

Father Name/

Husband name :

House No :

Street :

Village/Town :

District :

Pin :

Mobile Number :

DECLARATION

I, _____ D/o./S/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 : -

Signature : -

Mobile No : -

Self-attested copies of the following certificates should be enclosed with the application form.

1	SSC or Equivalent examination
2	Intermediate or 10+2 examination
3	Bachelors Degree / equivalent examination
4	Qualifying Examination /Preferential qualification /Technical qualification Pass certificates
5	Marks memos of all the years (qualifying examination)
6	Marks memos of all the years (Specialization/Post Graduation)
7	Registration Certificate of Para Medical Board
8	Latest Caste Certificates issued by the Tahsildar / MRO concerned
9	Study certificate for the years from 4th class to 10th class and in case of Private Study residency certificate from the Tahsildar / MRO concerned.
10	PH certificate in respect of candidates claiming reservation under PH Quota (SADERAM Certificate)
11	Relevant certificates in respect of candidates claiming Ex-Service man quota.
12	Experience Certificate/driving license/ certificate course in computer operations
13	1 Photographs duly pasted on the application form
14	Acknowledgement card