

No. 1-4/ANIMERS/Staff.Appt/2014/ 8/ ANDAMAN & NICOBAR ISLANDS MEDICAL EDUCATION AND RESEARCH SOCIETY (ANIMERS) DIRECTORATE OF HEALTH SERVICES ANDAMAN & NICOBAR ADMINISTRATION

Port Blair, dated the 20 January, 2015.

WALK-IN-INTERVIEW

Candidates having required qualification may appear for a walk-in-interview for the following posts purely on contract basis for a period of one year in the chamber of Principal Secretary(Health), Secretariat, A&N Administration, Port Blair on 29/01/2015 at 03.00 P.M.

1	Name of Post	Section-in-charge
	a) Number of Posts	02 Nos.
	b) Pay	Consolidated pay of Rs.40,000/- per month
	c) Age Limit	18-33 years for male
		18-38 years for Female
	d) Educational Qualification	Essential: - 1) Post Graduate in Finance or Hospital Administration or equivalent for 01 No. post of Section-in-charge.
		2) Graduate in Law or equivalent for 01 No. post of Section-in-charge.
		Desirable:- M.B.A degree.

Note:-

- The candidates should bring their original certificates and a copy of self attested certificates of all documents supporting their educational qualifications, experience, employment exchange registration, proof of age and local certificate etc., alongwith filled in prescribed proforma at the time of walk-in-interview.
- 2) All the candidates are requested to be present 01(one) hour before scheduled time on the date of interview for necessary formalities and verifications.
- 3) No TA/DA will be paid for attending the interview.
- 4) All the above posts are purely on contract basis and no claim for any regular appointment can be claimed or will be entertained.
- 5) The selected candidates will be posted at Andaman Nicobar Islands Institute of Medical Sciences (ANIIMS) at Port Blair.
- 6) The application format can be downloaded from the website www.and.nic.in

Member Secretary (ANIMERS)

FORMAT

FORM OF APPLICATION FOR THE POST OF SECTION-IN-CHARGE IN THE ANDAMAN AND NICOBAR ISLANDS MEDICAL EDUCATION AND RESEARCH SOCIETY, PORT BLAIR

Affix here a recent passport size colour photo self attested.

Name in Block letters (as recorded in 1. **Educational Certificates**) Name of Father/Mother/Guardian 2 (Specify) Whether Male or Female. 3 a) Date of Birth. 4 (as recorded in educational certificates) b)Age (as on 29.01.2015) (Enclose Copy) 5 Post Applied for Address of Correspondence with contact 6 No. and e-mail-id. Permanent Address 7 **Education Qualification** 8 (Enclose Copy) 9 Experience if any:-(Enclose Copy) **Employment Exchange Registration Card** 10 No. (Enclose Copy) Whether local or not 11. (Enclose Copy)

I hereby declare that all the statement made in the application are true, complete and correct to the best of my knowledge and belief and I understand that in the event of any information being false or incorrect or ineligibility being detected before or after my selection my candidature/appointment is liable to be cancelled.

Signature of Applicant

Date:-

Place:-