

No. 1-31/ANIMERS/SIGH.APP/NTF/2015/1/53 ANDAMAN & NICOBAR ISLANDS MEDICAL EDUCATION AND RESEARCH SOCIETY (ANIMERS) DIRECTORATE OF HEALTH SERVICES ANDAMAN & NICOBAR ADMINISTRATION ***

Port Blair, dated the 5 February, 2015

WALK-IN-INTERVIEW

period of one year, in the chamber of Director of Health Services, A&N Administration, Port Blair as detailed bellow: Candidates having required qualifications may appear for a walk-in-interview for the following position purely on contract basis, for a

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Cataloguer	Documentist	Library Attendant	Library Assistant	Deputy Librarian	Details of Posts
01	01	01	01	01	No. of Posts
EQ:-Bachelor's degree in library & information science.(B.Lib)	EQ.Bachelor's degree in library & information science.(B.Lib)	EQ:-12th Pass with computer knowledge	EQ:- Bachelor's degree in library & information science.(B.Lib) Desirable:- 01 year diploma in Computer application	EQ:- Master's Degree in Library & information science (M.Lib) Desirable:- 01 year experience in the concerned field.	Qualification & Essential criteria
18-33 years for male 18-38 years for Female	18-33 years for male 18-38 years for Female	18-33 years for male 18-38 years for Female	18-33 years for male 18-38 years for Female	18-33 years for male 18-38 years for Female	Age Limit
Rs.25,000/-	Rs.25,000/-	Rs.16,000/-	Rs.25,000/-	Rs.30,000/-	Consolidated Pay (per month)
16.02.2015 at 10.00 AM	16.02.2015 at 10.00 AM	16.02.2015 at 10.00 AM	16.02.2015 at 10.00 AM	16.02.2015 at 10.00 AM	Date & Time of Interview

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Dark Room Assistant	<u></u>	Modeller	Artist	Photographer
	02	01	02	02
diploma in photography & cinematography Desirable:- Minimum 02 years experience in the photography field.	in computer application Desirable. Certificate course in Electronic &Communications.	EQ:- 12 th Pass with diploma in Fine arts	EQ:-12th Pass with diploma in Fine arts	EQ:-12 th pass with 01 yr diploma in photography & cinematography Desirable:- Minimum 02 years experience in the photography field.
18-38 years for Female	18-33 years for male 18-38 years for Female	18-33 years for male 18-38 years for Female	18-33 years for male 18-38 years for Female	18-33 years for male 18-38 years for Female
Rs.20,000/-	Rs.22,000/-	Rs.20,000/-	Rs.20000/-	Rs. 20,000/-
17.02.2015 at 10.00 AM	17.02.2015 at 10.00 AM	17.02.2015 at 10.00 AM	17.02.2015 at 10.00 AM	17.02.2015 at 10.00 AM

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

Member Secretary (ANIMERS)

FORMAT

Application for the post of	in the Andaman & Nicobar
Islands Medical Education and Research	Society, Port Blair.

Affix here a recent passport size coloured photo self attested.

1.	Name in Block Letter
	(As recorded in the Education
	Certificate)
2.	Name of Father / Mother / Guardian
	(Specify)
3.	Whether Male or Female
4.	a) Date of Birth
	(As recorded in the Education
	Certificate)
	b) Age (as/02/2015)
5.	Post applied for
6.	Address for correspondence with
	contact number and e-mail ID
7.	Permanent Address
8.	Educational Qualification
	(Enclosed copy)
9.	Experience if any
	(Enclosed copy)
10.	Employment Exchange Reg. Card No.
	(Enclosed copy)
11.	Whether Local or Not
	(Enclosed 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 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 the Applicant

Date:

Place: