Rogi Kalyan Samiti Office of the Member Secretary (RKS) Shri Vinoba Bhave Civil Hospital

No.MS/RKS/VBCH/2022/94 1 2 1

Silvassa

Date: 07/01/2025

<u>ADVERTISEMENT</u>

Rogi Kalyan Samiti invites applications from eligible candidates for below mentioned posts to be filled on Short term contract basis under Shri Vinoba Bhave Civil Hospital, Dadra & Nagar Haveli and Daman & Diu, Silvassa. The application should reach the undersigned on or before 20101 12025.

Sr. No.	Name of Post	No. of Vacany	Qualification	Consolidated Salary per month
1	Operations Manager	01	Master in Health/Hospital Administration/PG Diploma in Health/Hospital administration. Experience in a reputed hospital	₹. 50,000/-
2	Floor Manager	02	Essential: 1. BDS/BAMS/BHMS/ B. Pharm /BSc/Any Degree. 2. Three years experience of working in a 500 Bedded Hospital. Desirable: Master in Health/Hospital Administration/PG Diploma in Health Hospital Administration	₹. 35,000/-

Eligible and desirous candidates may forward their applications in the prescribed format (download from website) to the <u>Office of the Member Secretary (RKS), Shri Vinoba Bhave Civil Hospital, Silvassa-396230</u>, 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:

- 1. 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
- 3. The Member Secretary (RKS), Shri Vinoba Bhave Civil Hospital, Silvassa reserves the right to terminate the selection process without assigning a reason.

Contact No. (0260) 2642940

Website: www.vbch.dnh.nic.in E-mail:silvassarogikalyansamiti@gmail.com

Member Secretary Rogi Kalyan Samiti SVBCH, Silvassa

APPLICATION FORM ROGI KALYAN SAMITI OFFICE OF THE MEMBER SECRETARY SHRI VINOBA BHAVE CIVIL HOSPITAL UT OF DADRA & NAGAR HAVELI AND DAMAN & DIU

Name of Post applied for	
Name of candidate (in block	letters)
Father's name:	
	IVIODIIE INO.
Date of birth:	(attested copy of valid Proof should be enclosed)
Age (as on @ <u>7/01/2025</u>) Years	Months
Category : ST/ SC/ 0	OBC / Others (attested copy of valid Proof should been closed)
Domicile of D&NH : Yes / No.	(attested copy of Domicile Certificate issued by Mamlatdar,
Dadra and	Nagar Haveli should be enclosed)
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		Nature of		
			From	То	Total Exp.	Duties
						P

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