

**U.T Administration of Dadra & Nagar Haveli and Daman & Diu,  
Department of Health & Family Welfare  
NAMO Hospital, Silvassa, Sayli Road**

**No.DMHS/Specialists/Khanvel-SDH/2025/203/ 4560**  
**ADVERTISEMENT**

**Date: 10/12/2025**

Department of Health & Family Welfare, Dadra & Nagar Haveli, Silvassa invites application from eligible candidates for below mentioned posts of Specialists and Medical Officer to be filled on Short term contract basis. The application should reach the undersigned on or before **23-12-2025**.

Sr. No.	Name of Post	No. of Vacancy	Age	Qualification	Consolidated Salary per month		
Specialist for posting at Khanvel Sub District Hospital							
1	<b>Specialists:</b> Physician - 01, Pediatrician/ Neonatologist – 01, Anesthetist – 01, Gynecologist – 01	04	Not Exceeding 45 Years	MD/MS/DNB/ Diploma with experience	<b>Salary as per experience for Degree:</b> Fresh- Rs.1,25,000/- Exp. More than 05 years- Rs.1,75,000/-  <b>for Diploma:</b> Fresh- Rs. 90,000/- Exp. More than 05 years- Rs. 1,25,000/-		
• RKS (KSDH) / NHM will pay additional incentives of Rs. 50,000/- per month for Specialist posted at Khanvel Sub District Hospital.							
Name of Post	No. of posts	Education Qualification	Monthly Remuneration (In. Rs.)		Monthly Incentive (In. Rs.)	Total Remuneration (In. Rs.)	
			Fresh	With 05 years' experience		Fresh	With 05 years' experience
Physician - 01, Pediatrician/ Neonatologist – 01, Anesthetist – 01, Gynecologist – 01	04	For Degree	1,25,000	1,75,000	50,000	1,75,000	2,25,000
		For Diploma	90,000	1,25,000	50,000	1,40,000	1,75,000
Medical Officer for posting at NAMO Hospital and PHCs							
Sr. No.	Name of Post	No. of Vacancy	Age	Qualification	Consolidated Salary per month		
2	Medical Officer	06	Not Exceeding 35 Years	1. MBBS 2. Completion of compulsory rotating internship.	Rs. 70,000/-		

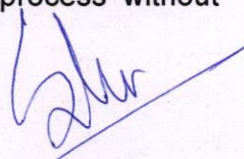
Eligible and desirous candidates may forward their applications before **23-12-2025** at Office of the Head of Office, at NAMO Hospital, Dadra and Nagar Haveli, Silvassa-396230 in the prescribed format with one set of attested photocopies of educational qualification and experience certificate. Details regarding eligibility, Recruitment rules, Salary details and the prescribed format of application are available on the official website : [www.dnh.gov.in](http://www.dnh.gov.in) or [www.vbch.dnh.nic.in](http://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 Administration reserves the right to terminate the selection process without assigning a reason.

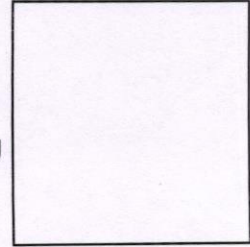
**Contact No:** (0260) 2642940

**E-mail:** [est.dmhs@gmail.com](mailto:est.dmhs@gmail.com)

  
**(SMCHO- Head of Office)  
Dept. of Health & Family  
Welfare, DNH**



APPLICATION FORM  
DEPARTMENT OF HEALTH & FAMILY WELFARE  
UT OF DADRA & NAGAR HAVELI AND DAMAN & DIU



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 9 / 12/2025) Years..... Months ..... Days.....

Category : ST/ SC/ OBC / Others (attested copy of valid Proof should be enclosed)

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	To	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