

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

No. MS/RKS/VBCH/2022/94 | 70 |

Silvassa

Date: 30/11/2024

**ADVERTISEMENT**

Rogi Kalyan Samiti is conducting Walk-In-Interview on dated 06.12.2024 for the following posts to be filled on Short term contract basis under Rogi Kalyan Samiti at Shri Vinoba Bhave Civil Hospital, Silvassa:

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 on regular basis.  Experience in a reputed hospital	₹. 50,000/-
2	Floor Manager	02	<b>Essential:</b> 1. BDS/BAMS/BHMS/ B. Pharm /BSc/Any Degree. 2. Three years experience of working in a 500 Bedded Hospital. <b>Desirable:</b> Master in Health/Hospital Administration/PG Diploma in Health Hospital Administration	₹. 35,000/-

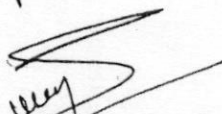
Candidates willing to appear for Walk-In-Interview shall report in **Conference Hall, 2<sup>nd</sup> Floor of Collector Office, Silvassa, U.T. of Dadra & Nagar Haveli and Daman & Diu at 09:00 AM on dated 06.12.2024.** You are required to bring all original certificate for documents verification with one set of attested photocopy. *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:**

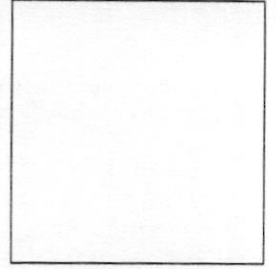
1. No TA/DA will be paid to the candidates for attending the interview.
2. Application will be summarily rejected if found deviant from the prescribed format and required criteria without assigning any reason
3. The Administration reserves the right to terminate the selection process without assigning a reason.

Contact No. (0260) 2642940

E-mail: [silvassarogikalyansamiti@gmail.com](mailto:silvassarogikalyansamiti@gmail.com)

  
(In-Charge RKS)  
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: .....

Address for  
communication:.....  
.....  
.....  
.....  
.....

Phone No. : ..... Mobile No: .....

Email Address: .....

Date of birth: .....(attested copy of valid Proof should be enclosed)

Age (as on   /11/2024  ) 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,  
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	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