

The following supporting documents should be enclosed along with application form.

Applications received without proper enclosures will summarily be rejected

Name of the Certificates	
1	Filled in Application form (downloaded from (https://vizianagaram.ap.gov.in/))
2	SSC or its equivalent examination pass-cum-marks memo.
3	Intermediate Certificate
4	Certificate of B.Sc (Audiology) /Diploma in Audio - Metry Technician from recognized institution in India
5	Certificate of registered in RCI (Rehabilitation Council of India)
6	Study certificates from 4 th Class to 10 th Class (for local status). In case of private study, the residence certificate obtained from the Tahsildar concerned for consecutive 7 years prior to passing of SSC or its equivalent.
7	Latest Caste certificate issued by the Tahsildar concerned (meeseva).
8	Physically Handicapped certificate (SADAREM Certificate) in case of candidates of disability.
10	Ex-Servicemen Certificate issued by the concerned authority
11	The candidates who are rendered services on Contract/Outsourcing basis under earmarked Govt., Institutions / State and Central Govt., Schemes in the State of Andhra Pradesh, should enclose Service certificate duly signed by competent authority along with attested copies of appointment order for considering contract/outsourcing service weightage.
12	Latest Income Certificate of the candidates who comes under Employee Weaker Sections

GOVERNMENT OF ANDHRA PRADESH
A.PVAIDYA VIDHANA PARISHAD:: VIZIANAGARAM DISTRICT
(NOTIFICATION NO:: 01/2023, Dt:. .10.2023)

Contract/Outsourcing Service Certificate

(Certificate to be issued by the Controlling Officer concerned DM&HO/DCHS/any Other Appointing Authority)

This is to certify that,S/o, D/o.....
..... has been working as (name of the post) in PHC/CHC/AH/DH/GGH/or any other AP State Institution at on **Contract/Out-Sourcing basis** with the Financial concurrence of the Government of AP /the details of his/her **Contract/Out-Sourcing service** as on 16.02.2022 are as follows:

Name of the institution	Urban/ Rural/ Tribal (or) Covid-19	Working /worked Period		Reasons for break in service (if any)	Whether there is financial concurrence for appointment (Yes /No)	Charges /Allegations /Adverse Remarks if any
		From	To			

I hereby declare that:

- 1.His /her services ason Contract/Out-sourcing basis during the above said period are satisfactory.
2. He/she does not have any adverse remarks from his superiors during the period of Contract /Out-sourcing service as _____
3. He/she is eligible for Contract/Out-sourcing Service Weightage as per the rules published in the notification.

Station:

Date:

Signature & Seal of the Controlling Officer
(DMHO/DCHS/any other competent District
Authority who appointed the applicant)

Imp. Note: The attested copy of appointment order must be enclosed along with this service certificate, otherwise the weightage for Contract/Outsourcing service will not be considered for final merit.

**GOVERNMENT OF ANDHRA PRADESH
A.P VAIDYA VIDHANA PARISHAD:: VIZIANAGARAM**

(Notification No: 01/2023, Date:. 11.10.2023)

Recruitment to the various posts to work on Out Sourcing basis in APVVP Hospitals under the control of DCHS, Vizianagaram District

<p>Application for the Post of :</p> <p>Regd. No. (to be filled by the office) </p>	<p align="center">Affix Passport size latest colour photograph</p>
--	--

1	Name of the Candidate with surname in Capital letters	
2	Gender	
3	Father Name with surname	
4	Name of the Husband with full Surname (if married women)	
5	Date of Birth (DD-MM-YYYY)	
6	Social Status (OC/OC-EWS/SC/ST/BC-A,B,C,D,E)	
7	Whether claiming EWS reservation (copy of the certificate to be enclosed)	
8	Whether claiming for service weightage for Contract / Outsourcing service (enclose contract/outsourcing service certificate)	Yes /No
9	Whether Physically Handicapped (VH/HH/OH/ID) (SADAREM Certificate to be enclosed)	Yes /No VH / HH / OH/ID
10	Whether Ex-Servicemen (Service Certificate to be enclosed)	Yes /No
11	Mobile number of the applicant	
12	Alternate Mobile Number	
13	Mail ID :	
14	DD particulars	DD.No. Date: Amount:
15	<u>Address for communication:</u>	

::02::

Marks obtained in the requisite Academic /Technical qualification

Name of the Academic /Technical education	Total Marks	Secured Marks	Year of passing (Month &Year)	Whether registered in respective council (Yes/No)

Contract/Outsourcing working details if any as on. 01.07.2023:

Sl. No	Name of the Institution	Contract /Outsourcin g	Urban/ Rural / Tribal (or) Covid-19	Period of service		Total period (Years–Months– Days)	Service certificate issued by the competent authority enclosed (yes/ no)
				From	To		

Details of School studies from 4th Class to 10th Class (for local status):_____

Sl. No	Class	Yearof passing	Name of the School in which studies	District
1	IV			
2	V			
3	VI			
4	VII			
5	VIII			
6	IX			
7	X			

DECLARATION

I, Smt/Kum/Sri.....D/o,S/o..... do hereby declare that, above particulars furnished by me are true to the best of my knowledge and also hereby agree that in the event of any of the details furnished above being found to be incorrect or false at a later date, my candidature will be forfeited summarily.

Signature of the Applicant

Note: Applications received without proper enclosures will summarily be rejected.

ACKNOWLEDGEMENT

Received Application of Sri / Smt / Kum _____
Resident of _____ for the post of _____ with
Regd.No. _____

Date:

Signature of the Officer

APPENDIX-I
CERTIFICATE OF RESIDENCE

Vide Sub-Clause(ii) of Clause(a) para 7 of the Presidential Order) It is here by certified.

- (a) That Sri/Srimathi/Kumari _____ S/oW/o,D/o_____ appeared for the first time for the matriculation (S.SC) Examination in _____(month)___year;
- (b) That he/she has not studied in any educational institution during the whole apart of the 4 consecutive academic years ending with the academic year in which he/she first appeared for the afore said examination;
- (c) That in the 7 years immediately preceding the commencement of the afore said examination, he/she resided in the following place/ places namely,
-

Village	Taluk	District	Period
1.			
2.			
3.			
4.			
5.			
6.			
7.			

Station: OFFICERSEAL Officer of Revenue Department not
Date: Below the rank of Tahsildhar or
 Deputy Tahsildhar in independent charge
 of a Sub Taluk

Date: _____

*Strike off 'whole' 'apart', as the case may be