CHENNAI CITY URBAN HEALTH MISSION GREATER CHENNAI CORPORATION, CHENNAI 600 003

The Chennai City Urban Health Mission proposes to engage following staff to work in Urban Health & Wellness center of Greater Chennai Corporation under National Urban Health Mission on contractual basis. The details of vacancies and minimum educational qualification are given below:

S. No	Designati on	Nos req uir ed	Consolid ated pay per Month (In Rs.)	Qualifications	Age Limit at the time of appoint ment
1	Medical Officer	30	60,000	MBBS Degree awarded by a University or Institution recognized by the UGC for the purpose of its grants. The courses must have been approved by the Medical Council of India and duly registered in Tamil Nadu Medical Council/National Medical Council.	Below 40 Years
2	Staff Nurse	32	18,000	Candidates should possess a Diploma in GNM/BSc.(Nursing) from Government or Government approved private Nursing Colleges which are recognized by the Indian Nursing Council and duly registered with Tamil Nadu Nurses and Midwives council.	Below 50 Years
3	MPHW/ Multi- Purpose Health Worker (HealthIns pector- Grade-II) - Male	12	14,000	i) Must have passed plus two with Biology or Botany and Zoology. ii) Must have passed Tamil language as a subject in SSLC level. iii) Must possess two years for Multipurpose Health worker (male) / Health Inspector/Sanitary Inspector course training / offered by recognized private institution /Trust/Universities / Deemed Universities including Gandhigram Rural Institute Training course certificate granted by the Director of Public Health and Preventive Medicine.	Below 50Years
4	Support Staff	66	8,500	Should have studied minimum 8 th Standard.	Below 50Years

Conditions of recruitment

- Place of work will be in Greater Chennai Corporation limits.
- Contract Period is for 11 months only and it is purely on temporary basis.

- The candidate shall not claim any rights for permanency in the contractual job. The employer is Chennai City Urban Health Mission.
- The Chennai City Urban Health Mission Administration reserves the right not to specify any reason for such termination.
- The selected candidates need to enter into an agreement with Chennai City Urban Health Mission.
- Location of the vacancy is attached below

The application format can be freely downloaded from the website www.chennaicorporation.gov.in

The list of self-attested documents photo copies to be attached along with the filled application form:

- 1. One recent passport size photographs.
- 2. Evidence of Date of Birth (Birth Certificate / SSLC / HSC certificate).
- 3. Evidence of Educational Qualification and Marks Sheets (SSLC / HSC / Degree / Provisional or Degree Certificate / Multipurpose Health Worker (HI) training certificate issued by the Tamil Nadu Government / Private Institutions Authorized by the Government of Tamil Nadu / as per existing norms in force etc.,).
- 4. Tamil Nadu Nurses and Midwives council registration certificate (for Nurses) GNM / B.Sc (Nursing) qualification from the institution recognized by the Indian Nursing council and duly registered with Tamil Nadu Nurses and Midwives council.
- 5. Tamil Nadu Medical Council Registration Certificate (for Doctors) minimum MBBS Degree recognized by Medical Council of India duly registered in Tamil Nadu Medical Council, If MBBS from Foreign University the MCI mark sheet is mandatory.
- 6. Evidence for Tamil eligibility (10th or 12th standard mark sheet).
- 7. Community Certificate issued by the Revenue Department
- 8. Proof of residency:
 - a. Nativity Certificate issued by the Revenue Department
 - b. Voter ID
 - c. Panchayat / Municipality / Corporation / Tax receipt
 - d. Aadhar Card
 - e. Ration Card
- 9. Certificate of Character and conduct issued by a Group A or Group B Officer working in Government. The Certificate should be a recent one issued within 3 months prior to the notification (applicable for all the applicants including fresh graduates).

- 10. Certificate of Character and conduct issued by the Head of the Institution where the candidate had undergone the course or currently studying.
- 11. In the case of a differently-abled person, a Certificate from a Block Medical Officer to the effect that the candidate is fit enough to discharge the duties assigned along with the percentage of Disability.
- 12. Certified evidence for work experience.
- 13. No objection certificate from the competent authority (if applicable).
- 14. Any other special records of significance from competent authorities as indicated in the selection criteria mentioned.
- 15. Must possess physical fitness for camp life.
- 16. The Working hours for the Urban Primary Health Centre will be from 8 AM to 12 PM & 4 PM to 8 PM.
- 17. Candidate will be selected based on the scoring criteria described in the Government Orders for selection of Human Resource for Urban Health and Wellness Centres. Screen will be given based required document submitted in the application.

The Candidates should submit their completed application and relevant certificates either by Postal Service or in-person to the address given below on or before <u>06.09.2024</u> till <u>5.00 PM. Applications received beyond last date and time will not be entertained.</u>

"Office of the Member Secretary, CCUHM / City Health Officer, Public Health Department, 3rd Floor, Amma Maligai Greater Chennai Corporation, Ripon Buildings, Chennai - 3"

For Further details, candidates may Contact The City Health Officer, Public Health Department, Ripon Buildings, Chennai - 600 003, Phone: 044 - 2561 9330, 044 - 2561 9209, during office hours on working days.

Member Secretary/City Health Officer Chennai City Urban Health Mission

GREATER CHENNAI CORPORATION-PUBLIC HEALTH DEPARTMENT APPLICATION FOR THE POSTS FOR URBAN HEALTH AND WELLNESS CENTER IN GCC ON CONTRACT BASIS

Na: Me Ins	Passport size photo			
1.	Applicants Name/ விண்ணப்பதாரரின் பெயர்	:		
2.	Father Name (or) Husband Name/ தந்தை பெயர் (அல்லது)கணவர் பெயர்	:		
3.	Date of Birth (DD/MM/YYYY) / பிறந்த தேதி	:		
4.	Age / வயது	:		
_	Educational Qualification / கல்வி தகுதி (சான்றுடன்)	:		
5.	% of marks obtained in the qualifying examination (Degree / Diploma) / தகுதித் தேர்வில் பெற்ற மதிப்பெண்களின் %			
6.	Current Residential Address / தற்போதையவீட்டு முகவரி(சான்றுடன்)			
	Door No/ வீட்டு எண்			
	Street Name/ தெருவின் பெயர்			
	Area /பகுதி	:		
	District/ மாவட்டம்			
	Name of the Zone in Chennai Corporation/ சென்னை மாநகராட்சி மண்டலத்தின் பெயர்			
	Division Number / வார்டு எண்			
	Permanent Address / நிரந்தர முகவரி			
	Door No/ வீட்டு எண்			
7.	Street Name/ தெருவின் பெயர்			
	Area /பகுதி	:		
	District/ மாவட்டம்			
8.	Religion / மதம்	:		
0.	Community / சாதி(சான்றுடன்)	:		

9.	Aadhar Card Number / ஆதார் எண்(சான்றுடன்)		
10.	Phone Number / தொலைபேசி எண்	:	
11.	Email ID (if Available) மின்னஞ்சல் முகவரி	:	
	Worked in COVID 19- Pandemic – (If Yes Experience Certificate to be Enclosed) கோவிட் 19 தொற்று காலத்தில் பணிபுரிந்துள்ளாரா? ஆம்/இல்லை (ஆம் எனில் அனுபவச்சான்று இணைக்கப்பட வேண்டும்)	:	Yes /No
12.b	COVID 19 Pandemic - Experience (in .b number of months) கோவிட் 19 தொற்று கால பணி அனுபவம்(மாதங்களில்)		
	Transgender/ Differently Abled/ Deserted wife/ Destitute widow – (If Yes Certificate to be Enclosed) மூன்றாம்பாலினம்,மாற்றுத்திறனாளி,கணவரால் கைவிடப்பட்டவர்,ஆதவரற்ற விதவை (ஆம் எனில் சான்று இணைக்கப்ப வேண்டும்)	:	Yes /No
14	Working Experience in any Health Care Institution. (If Yes Experience Certificate to be Enclosed) வேறு எதாவது சுகாதார மையத்தில் பணிபுரிந்த அனுபவம் (ஆம் எனில் அனுபவச்சான்று இணைக்கப்பம் வேண்டும்)		

I attest that the information stated is true to the best of my knowledge. மேலே கொடுக்கப்பட்ட அணைத்து தகவல்கலும் உண்மை என்று சான்றளிக்கிறேன்.

Place / & Lib:

Date /**தேதி**:

Applicants Signature விண்ணப்பதாரரின் கையொப்பம்