

Government of Tripura
Directorate of Health Services
Agartala : West Tripura

NO.F. 3(229)-HFW/2015.

Dated ___/___/2015.

Employment Notification

A walk-in-interview will be held for selection of candidates for filling up vacancies in the post of General Duty Medical Officer (GDMO)/Junior Medical Officer (JMO) (Group-'A' Gazetted) in Grade-IV of THS under the Health & F.W. Department, Govt. of Tripura on **ad-hoc basis** in the Pay Band-4 (Rs.15,600-39,100/-) with Grade Pay- Rs.5400/- plus admissible allowance(s). Candidates with PG Degree/Diploma would be given additional increments (2 additional increment for PG Degree and 1 for PG Diploma) as per Tripura Health Services Rules,1974.

Vacancies:-Total vacant post -218(SC-34, ST-81 & UR-103).

QUALIFICATION:- Passed in MBBS Course from any Recognized Medical College & 1 (one) year Compulsory Internship Training Course.

AGE:- Up-to 40 (forty) years as on 31.10.2015, upper age is relaxable by 5 (five) Years for SC & ST candidate(s).

Venue of interview:- Office Chamber of Director of Health Services, Government of Tripura, Pandit Nehru Complex, Gurkhabasti, PO-Kunjaban, Agartala, West Tripura.

Date and time of interview:- 30th October 2015 from 11.00 AM to 2 PM(for the candidates belongs to General Categories) and 31st October 2015 from 11.00 AM to 2 PM (for the candidates belongs to SC & ST Categories).

Eligible willing candidates may appear before the walk-in-interview board alongwith **original and attested copies** of Mark Sheet of Educational Qualifications, MBBS Pass Certificate, Internship Completion Certificate, Permanent Medical Registration Certificate, Caste Certificate (if any), Age Proof Certificate & Nationality Proof Certificate and also with an application in plain paper stating the following:-

1. **Application for the post of:-**
2. **Name of the applicant (IN BLOCK LETTERS):-**
3. **Father's/Husband's name:-**
4. **Permanent address:-**
5. **Present address to which communication is to be made:-**
6. **Mobile No--- , Telephone No---, Email address----**
7. **Qualification:-**
8. **Date of birth:-**
9. **Age:- Years-Months-Days as on 31.10.2015.**
10. **Nationality:-**
11. **Religion:-**
12. **Whether SC/ST:-**

(Dr. J.K. Dev Varma.)
Director of Health Services
Govt. of Tripura.