

TELANGANA VAIDYA VIDHANA PARISHAD
OFFICE OF THE SUPERINTENDENT DISTRICT HEADQUARTERS HOSPITAL MANCHERIAL
NOTIFICATION NO. 329/Recruitment/2023, Dt: 31-08-2023
Application for the post of Civil Assistant Surgeon Specialists and Civil Assistant
Surgeon in TVVP Mancherial District

Last date for Receiving of Applications on.08.09.2023, 4.00 PM

Name of the Post:

1	Name of the Candidate							Paste Photograph here and sign across by self attestation		
2	Name of the Father									
3	Name of the Mother									
4	Name of the Husband									
5	Gender									
6	Date of Birth									
7	Social Status (Please tick)	OC	BC-A	BC-B	BC-C	BC-D	BC-E	SC	ST	EWS
8	Whether Physically handicapped (Please tick)	Yes		No						
9	Whether Ex-Servicemen/Woman (Please tick)	Yes		No						

Details of School Education: -

Class	Year of Education	Regular/Private	Name of the School	District of the School
1 st				
2 nd				
3 rd				
4 th				
5 th				
6 th				
7 th				
8 th				
9 th				
10 th				

Details of Qualifying Examination: -

Course	Year of Education	Year of Passing	Name of the University/Board
MBBS			
Degree/Diploma/DNB			

Details of Medical Council Registration: -

Course	Council Reg.NO.	Date	Name of the Council	Valid up to

Details of Marks in Qualifying Exam: -

Consolidated Total Marks of the Exam	Total Marks	Marks obtained by the Candidate	Percentage (%) of Obtained
MBBS			
MD/Diploma/DNB			

ADDRESS PARTICULARS:

Name :
Father/Husband Name :
House No. :
Street :
Village/Town :
District :
Pin :
Contact No. :

Check List:

1	Bonafied Certificate from 1 st class to 10 th class
2	SSC and Intermediate Marks Memo
3	MBBS Marks memo (Consolidated), TS Medical Council registration
4	PG Degree/DNB, Diploma Marks Memo (Consolidated) TS Medical Council registration, provisional Certificate
5	Caste certificate, EWF Certificate in any

SUPERINTENDENT DISTRICT HEADQUARTERS HOSPITAL: :

MANCHERIAL (TVVP)

ACKNOWLEDGEMENT TO CANDIDATE

Application No.

Application for the post of **CASS/CAS / in TVVP Mancherial District)** post on Contract

basis, Received from Kum/Smt.....

D/o, W/o. R/o

Date:

Signature of the
Receiving Employee