



Odisha State Health & Family Welfare Society, Govt. of Odisha
Deptt. of Health & Family Welfare, Govt. of Odisha
Annex Building of SIH&FW, Nayapalli, Unit-8, Bhubaneswar-751012, District-
Khorda (Odisha) Phone/Fax: 0674- 2392480/79



Corrigendum

Advt. No. 25/2021

Date :- 23 / 10 / 2021

Ref.: Advt. No. 22/2021 dt. 06.10.2021.

Candidates may refer to the advertisement no. 22/2021 dtd. 06.10.2021 for the recruitment of District Programme Manager and State Programme Assistant, published in "The Samaja" (all Odisha editions), "The Dharitri" (all Odisha editions) and "The New Indian Express" (Odisha edition only). Due to the technical error in Online Recruitment Management System (ORMS), the following amendment to the advertisement is being made:

1. Applications for the posts as per the advertisement no. 22/2021 dtd. 06.10.2021 as mentioned above are invited from the aspiring eligible candidates to be submitted through offline mode only and send to this office through Speed Post/ Regd. Post & Courier to reach this office maximum by 5.30 P.M of the last date of submission of application. The last date for submission of Application Form (as available in the official website of NHM, Odisha i.e. **www.nhmodisha.gov.in**) along with relevant documents for the above said posts is on or before 06.11.2021.
2. Candidates, who have already applied through online and have sent their application form along with relevant documents to this office, need not apply again.

The candidates may visit the official website of NHM i.e. **www.nhmodisha.gov.in** for details and apply for the said posts within the stipulated date and time.

All other contents of the aforesaid advertisement shall however, remain unchanged.

-Sd-

Mission Director
National Health Mission, Odisha

12. Employment Record:-

I. Total years of post qualification experience:-

II. Total years of post qualification experience under OSH&FW Society:-

13. Experience Details (starting from present / last employment):-

Name of the Employer	Post Held	From Date	To Date	Total	
				Year	Month

14. PAR Details Format (Only for employees working under OSH&FW Society):-

Name of the Employee:-		
Present Designation:-		
Remarks in PAR of preceding Three Terms of Contractual Service.	Reporting Period	Remarks in PAR

Declaration: I do hereby declare that the information furnished above are true to the best of my knowledge and belief and that, if at any stage, it is found that any of the above material information is false / incorrect or is suppressed by me, my candidature / appointment is liable to be rejected / terminated. I also declare that I have never been disengaged from service under the OSH&FWS, Odisha on administrative ground such as disobedience / poor performances/ misbehavior/ criminal activity etc.

Date:

Place:

Full Signature of the Applicant

List of enclosure(s):-

Note:

1. **The following documents are to be enclosed along with the application:**
 - a. **One copy of self attested photograph affixed at the application form.**
 - b. **Self attested photocopies of all certificates/mark sheets/documents in support of age, qualification, experience etc.**
 - c. **Self attested photocopy of Identity Proof (Voter ID card / PAN card / Driving License / Aadhaar card / Passport).**