

NOTIFICATION
GOVERNMENT OF ANDHRA PRADESH
HM&FW, Department

Medical Education Department

Alcohol & Drug De-Addiction Center at Government Teaching General Hospital, Vizianagaram

(Draft Notification No: 01/2026, Date: 21.05.2026)

Recruitment to the Certain Cadre's of Posts to work on Contract Basis in **Alcohol & Drug De-Addiction Center at Government Teaching General Hospital, Vizianagaram** under the administrative control of DME, AP, Vijayawada

Application for the Post of: _____ Application No. (to be filled by the office) { _____ }	Affix Pass port size latest colour photograph			
1	Name of the Candidate			
2	Gender			
3	Fathers Name			
4	Date of Birth (DD-MM-YYYY)			
5	Social Status (OC/OC-EWS/SC/ST/BC-A,B,C,D,E)			
6	Whether claiming for service weightage for Contract / Outsourcing service (enclose contract / Outsourcing Service certificate)	Yes/No		
7	Whether Physically Handicapped (VH/HH/OH/) (SADAREM Certificate to been closed)			
8	Whether claiming EWS reservation (copy of the certificate enclosed)			
9	Whether Ex-Servicemen (enclose Service Certificate)	Yes/No		
10	Mobile number of the applicant	1.	2.	
11	DD particulars	DD.No.	Date:	Amount:
12	<u>Address for communication:</u>			
13	<u>Email.ID for Correspondence:::</u>			

Marks obtained in the requisite Academic
/Professional / Technical qualification

Qualification	Maximum Marks	Marks obtained	Year of passing (Month &Year)	Whether registered In respective council (Yes/No)

Details of Contract/ Outsourcing /Honorarium service as on. 31.12.2025:

Sl. No	Name of the Institution	Contract/ Out-sourcing	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 4thClass to 10thClass (for local status):

Sl. No	Class	Year of passing	Name of the School	Town and District
1	IV			
2	V			
3	VI			
4	VII			
5	VIII			
6	IX			
7	X			

DECLARATION,

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

Signature of the applicant
Date:

GOVERNMENT OF ANDHRA PRADESH
Contract/Outsourcing/Honorarium Service
Certificate (Certificate to be issued by the Controlling Officer
concerned
(DM&HO/DCHS/Principals of GMC/ Superintendents of GGH/ or any
Other Appointing Authority)

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

Name of the institution	Urban/ Rural/Tribal (or) Covid-19	Period		Duration	Reasons for break in service (if any)	Charges /allegations /adverse remarks if any
		From	To			

I here by declare that:

1. His/her service as.....on Contract/Out-sourcing honorarium basis during the above said period is satisfactory.
2. He/she does not have any adverse remarks from his superiors during the period of Contract/Out-sourcing/Honorarium service.
3. He/she is eligible for Contract / Outsourcing Service Weight age as per the rules published in the notification.

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

Imp.Note: The self attested copy of appointment order must be en-closed along with this service certificate, otherwise weight age for Contract/ Outsourcing/honorarium service will not be considered for final merit.

APPENDIX-I
CERTIFICATE OF RESIDENCE

(Vide Sub-Clause (ii) of Clause (a) para 7 of the Presidential order) It is here by Certified,

(d) That Sri/Srimathi /Kumari _____

S/o. W/o , D/o _____ appeared for the first time for the matriculation (S.SC) Examination in (month) _____ year;

(e) That he/she has not studied in any educational institution during the whole or apart of the 4 consecutive academic years ending with the academic year in which he/she first appeared for the aforesaid examination;

(f) That in the 4 years immediately preceding the commencement of the aforesaid examination, he/she resided in the following place/places namely,

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

Station: OFFICE SEAL
Date:

Officer of Revenue Department
not below the rank of Tahsildhar
or Deputy Tahsildhar in
independent Charge of a Sub Taluk

Date:

*Strike off "whole" 'apart', as the case maybe.

ACKNOWLEDGEMENT

The application received for the _____
Post in the ADDC at GTGH, Vizianagaram vide Notification No.01/2026
under control of Government teaching General Hospital (DME Control)
Vizianagaram on Contract Basis for a Period of One Year. Notification
issued on _____ 04-2026 and the application registration No.is _____ of
Sri/Smt _____ D/o/S/o _____

Receiver Signature

Candidate Signature

Date:

Note: Candidates are advised to thoroughly read the notification and visit the official website regularly for updates, information, and further instructions issued by the DSC ,VZM from time to time.

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