



**GOVERNMENT OF ANDHRA PRADESH**  
**HEALTH, MEDICAL & FAMILY WELFARE DEPARTMENT**  
**DIRECTORATE OF SECONDARY HEALTH,**  
**Notification No:01/2026, Dated: .06.2026**

**WALK-IN-RECRUITMENT FOR THE POST OF CIVIL ASSISTANT SURGEON SPECIALISTS /  
CIVIL ASSISTANT SURGEON (GENERAL) IN SECONDARY HEALTH HOSPITALS IN  
ERSTWHILE SRIKAKULAM DISTRICT.**

**IN THE SPECIALTY OF :** \_\_\_\_\_

1. Name of the candidate :

2. Father's name :

3. Date of birth (as per SSC) :

4. Social status :

5. UNIC ID (Aadhar) :

6. Details of school study :

Affix latest passport size photo

CLASS	Name of the School	Town/Village	District	State
IV				
V				
VI				
VII				
VIII				
IX				
X				

7. Disability if any :

a. Type of disability : VH/HH/OH/MR/Multipler disorders

b. Percentage of disability :

8. Whether claiming EWS : Yes / No
9. Whether claiming Ex-serviceman : Yes / No
- 10 Permanent address :

- 11 Mobile Nos.(Whats app No. mandatory) :
- 12 Email id :
- 13 Medical Educational Details :

Sl. No.	Qualification PG Degree /PG Diploma/DNB/M BBS(for CAS General Candidates)	Name of the University and Address	Marks		Percentage ofmarks
			Maximum	Obtained /Grade	
1					
2					
3					
4					

14. Month and Year of passing Qualifying exam :
15. PG/Super Specialty from Central Institution : Yes /No
16. Whether registered with AP Medical Council : Yes/ No

a. RegistrationNo. \_\_\_\_\_

17. Copies of the certificates enclosed.

a	Filled in application form, duly signed by the candidate.	Yes/No
b	SSC certificate or its equivalent (proof of Date of Birth).	Yes/No
c	Certificate of P.G. Degree/P.G. Diploma/DNB/MBBS	Yes/No
d	Marks Memos of all years of P.G. Degree/ P.G. Diploma/ DNB/MBBS	Yes/No
e	A.P. Medical Council Registration Certificate.	Yes/No
f	Study certificates from classes 4 <sup>th</sup> to 10 <sup>th</sup> . In case of private study, local candidature certificate for the seven years period preceding to 10 <sup>th</sup> class in the prescribed proforma from the Tahsildar concerned in prescribed proforma vide Sub clause (ii) of clause (a) of para 7 of the Presidential Order (proforma is herewith enclosed). Candidates migrated from Telangana state shall submit certificate of local candidature as per G.O.Ms.No. 132 & 133, dt.13.06.2017. In absence of the suitable certificate, the candidate will be considered as non- local and he/she would be considered for contract appointment only.	Yes/No
g	Social status including valid EWS certificate issued by the competent authority, in absence of which candidate will be considered as open category. If communal reservation is claimed under any category, the same candidate will not be considered for EWS reservation.	Yes/No
h	Certificate of disability issued in SADAREM in case of orthopedically disabled.	Yes/No
i	EX-service man certificate as applicable.	Yes/No
j	Contract Service certificate in the specialty concerned from the controlling officer concerned i.e., DM&HO / DCHS/ Superintendent of GGH/ Principal (for the period after completion of PG degree).	Yes/No

18.UNDER TAKING :

- a. I hereby declare that I will be abide to the conditions, rules and regulations stipulated by the department regarding the post of CAS Specialist.
- b. The information furnished above is true to the best of my knowledge.
- c. I am also aware that I am liable for any penal action that may be taken against me if the information furnished by me is found to be fake/false/fabricated data later date.

Place :

Date :

SIGNATURE OF THE APPLICANT