

Annexure X

Annexure X - A



National Health Mission - Tamil Nadu

Application for the post of Mid Level Health Provider (MLHP) to be placed at

HSC-HWCs

District Health Society _____ District

இடைநிலை சுகாதார பணியாளர்

Passport size
photo

1	Applicant's Name / விண்ணப்பதாரர் பெயர்	
2	Father's Name / தந்தை பெயர்	
3	DOB (DD/MM/YY) / பிறந்த தேதி	
4	Age /வயது	
5	Educational Qualification / கல்வித் தகுதி	
6	Current Residential address / தற்போதைய வீட்டு முகவரி	
7	Permanent Address / நிரந்தர முகவரி	
8	Aadhar Card Number / ஆதார் எண்	
9	Phone Number / தொலைபேசி எண்	
10	Email ID (If Available) / மின்னஞ்சல் முகவரி	

பின்பக்கம் அறிவுறுத்தப்பட்டுள்ள விபரங்கள் அடிப்படையில் தேவையான சான்றுகளை இத்துடன் சமர்ப்பித்துள்ளேன்.

Place/இடம்:

Date/தேதி:

Applicant's Signature
விண்ணப்பதாரர் கையொப்பம்

The list of self-attested document photocopies to be attached along with the filled application form:

1. Two recent passport size color photographs
2. Evidence of Date of Birth (Birth Certificate/SSLC / HSC Certificate)
3. Evidence of Educational qualification and marks (SSLC / HSC / Diploma / B.Sc., Degree - Provisional or Degree certificate etc.)
4. Tamil Nadu Nurses and Midwives council registration Certificate
5. Evidence for Tamil eligibility (10th or 12th standard marks)
6. Proof of residency:
 - a. Nativity Certificate issued by the Revenue Department
 - b. Voter ID
 - c. Panchayat/ Municipality/Corporation/Tax receipt
 - d. Aadhar card
 - e. Ration card
7. Certificate of character and conduct issued by a Group A or Group B Officer working in Government. The Certificate should be a recent one issued within 3 months prior to the notification (applicable for all the applicants including fresh graduates)
8. Certificate of character and conduct issued by the Head of the Institution where the candidate had undergone the course or currently studying.
9. In the case of a differently-abled person, a Certificate from a Block Medical Officer to the effect that the candidate is fit enough to discharge the duties assigned along with the percentage of Disability.
10. Certified evidence for work experience.
11. No Objection Certificate from the competent authority
(if applicable)
12. Any other special records of significance from competent authorities as indicated in the selection criteria mentioned