DIRECTORATE GENERAL OF HEALTH SERVICES GOVERNMENT OF NCT OF DELHI OFFICE OF DELHI AROGYA KOSH 3 FLOOR, DGD BUILDING, 5-1, SCHOOL BLOCK, SHAKARPUR, DELHI-110092

APPOINTMENT OF ACCOUNTS OFFICER

Applications are invited for the post of Accounts Officer on contractual basis for a period of one year, extendable upto 2 years based on work & conduct by Delhi Arogya Kosh, a registered society under Govt. of NCT of Delhi. The application form is available at www.health.delhigovt.nic.in

Essential Qualification & Experience	Age Limit	Remuneration
Must have worked as Accounts Officer/ Assistant Accounts Officer in Govt. of Delhi/Central Government and retired from the said post	Upto 65 years	As per existing government rules for post-retirement engagement

The interested candidates may send their application along with their bio-data and requisite documents through Speed Post/ By Hand at the following address latest by 6 PM on 16.07.2024:

O/o Delhi Arogya Kosh Room No. 304, 3nd Floor, DGD Building, S-1, School Block, Shakarpur, Delhi-110092

> DIRECTOR GENERAL HEALTH SERVICES-CUM-MEMBER SECRETARY, DELHI AROGYA KOSH

DIP/ /20-25

स्वास्थ्य सेवाए महानिदेशालय, दिल्ली सरकार कार्यालय दिल्ली आरोग्य कोष तीसरी मंजिल, डी.जी.डी. बिल्डिंग, एस-1, स्कूल ब्लाक, शकरपुर, दिल्ली 1100092

लेखा अधिकारी की नियुक्ति

दिल्ली आरोग्य कोष द्वारा एक साल की अवधि के लिए अनुबंध पर लेखा अधिकारी की नियुक्ति हेतु आवेदन आमंत्रित किया जा रहा है। यह नियुक्ति कार्य एवं व्यवहार कुशलता के आधार पर और दो साल के लिए विस्तृत किया जा सकता हैं। आवेदन फॉर्म www.health.delhigovt.nic.in पर उपलब्ध हैं।

आवश्यक योग्यता तथा अनुभव	उम्र सीमा	पारिश्रमिक
दिल्ली सरकार / केंद्र सरकार में लेखा	65 वर्ष तक	सेवानिवृत्ति के बाद की नियुक्ति के लिए
अधिकारी / सहायक लेखा अधिकारी के		मौजूदा सरकारी नियमानुसार
पद से सेवानिवृत होना अनिवार्य हैं		<u> </u>

इच्छुक उम्मीदवार अपने आवेदन पत्र को अपने बायोडाटा और आवश्यक दस्तावेजों के साथ स्पीड पोस्ट / स्वयं द्वारा निम्नलिखित पते पर दिनांक 16.7.2024 के शाम 6 बजे तक भेज सकते हैं।

> कार्यालय दिल्ली आरोग्य कोष कमरा न. 304, तीसरी मंजिल, डी.जी.डी. बिल्डिंग, एस-1, स्कूल ब्लाक, शकरपुर, दिल्ली 1100092

> > स्वास्थ्य सेवा महानिदेशक, दिल्ली सरकार

DIP//20-25

APPLICATION FOR THE POST OF ACCOUNTS OFFICER

PERSONAL DETAILS			SELF ATTESTED		
1.	Name		PHOTOGRAPH		
2.	Father's Name				
3.	Date of Birth				
4.	Age as on 01.07.2024				
5.	Correspondance Address	L			
6.	Permanent Address				
7.	Mobile Number				
8.	Email ID				
wo	WORK EXPERIENCE				
9.	Work Experience as Accounts Officer in number of years				
10.	Name of Govt. Departments/ Organizations where the candidate had worked as Accounts Officer in Chronological Order				
11.	Department where retired from				
12.	Experience of working in computer (MS Word, Excel, Power Point, Tally)		_		
13.	Last Pay Drawn				

Any other specific information in relation to essential / desirable qualifications and experience (use separate sheets, if necessary)

DECLARATION

I solemnly declare that all the statements made in the application are true, complete and correct to the best of my knowledge and belief. I understand and agree that in the event of any information being found false or Incorrect / Incomplete or Ineligibility being detected at any time before or after selection / interview, my candidature is liable to be rejected and I shall be bound by the decision of the Directorate General of Health Services – cum – Member Secretary, Delhi Arogya Kosh.

Signature of candidate with date: Email: Mobile: