No. Swa-Ni(1)Kh(2)1/91(EXM) Health and Family Welfare Department Himachal Pradesh.

To

S/Sh. Smt.



Dated Shimla-171009, the

Subject: -

Counseling for the post of Medical Laboratory Technician Gr-II(WEXM) through Batch wise basis on contract.

Memo:

Your name have been sponsored by the Employment / Sub Employment Exchange of HP in reference to this Directorate requisition letter dated 23.06.2023 for appointment to the post of Medical Laboratory Technician Gr-II (WEXM). The counseling for screening of documents has been re-fixed on 12.07.2024 at State Health and Family Welfare Training Centre, Parimahal, Shimla-171009, sharp 9:30 AM to 4:30 PM. You are, therefore, directed to appear in person for counseling on the scheduled date &time and venue given against your name and bring the original certificate of examination passed and other required documents (if any) alongwith one set of self attested.

- 1. Bio- Data Proforma which is available on the official website i.e. www.hpealth.nic.in(dully filled).
- 2. One passport size colored photograph.
- 3. Employment Exchange Card/ Certificate with date of validity.
- 4. Matriculation certificate for age verification.
- 5. Certificate of Educational Qualification 10+2 Science, B.Sc. Medical Laboratory Technology/ B.Sc. Medical Technology Laboratory/ B.Sc. Medical Technology(Laboratory)/ B.Sc. Medical Laboratory Sciences/ B.Sc. in Medical Laboratory Technology(lateral) from a recognized University or an Institution affiliated to a recognized University along with "Detail Marks Certificate".
- Certificate of Registration in HP Paramedical Council for above said qualification alongwith latest / valid renewal certificate.
- 7. Valid Category certificate(s) in support of their eligibility, if any viz, SC/ST/OBC/EWS. All these certificate should be on Proforma prescribed by the Government of HP from time to time, SC,ST,OBC Certificates should be in accordance with the instructions of the Government issued vide letter No. PER(AP)-C-F(10)-4/2010 dated 05.08.2019.
- 8. Dependent Certificate/ Ward of Ex-Servicemen Certificate issued by the competent authority and a latest affidavit duly attested by the authority authorized under the Indian Oath Act/ on Annexure-A and Annexure -B(Affidavit) as per Government of HP Department of Personnel (AP-III) letter No. PER(AP)-C-B(12)-1/97-Vol.VIII dated 15.09.2010, No. PER (AP)-C-B(12)-1/2013 dated 18th March, 2020 available on the official website i.e. www.hphealth.nic.in.
- 9. Character Certificate from Magistrate /Executive Magistrate.
- 10. Certificate of Bonafide resident of HP.

Note:-

- 1. The Candidate who do not fulfill the education qualification and other criteria for the said post is not required to appear for counseling. Only the documents/ proof given by the candidate at the time of counseling will be considered and no supplement document will entertained after counseling.
- 2. That no column is wrongly filled or kept blank on Proforma therein would be used to determine the eligibility of candidates to be called for counseling.
- 3. No representation / correspondence will be entertained against final rejection of candidature.
- 4. Candidates are also advised to visit the Health Department Website from time to time for updates in their own interest.

Director Health Services
Himachal Pradesh

Roll No.	Date of counseling	Name & Address of Candidate						
1	12.07.2024	Smt. Neeraj Kumari W/o Sh. Sidharath Vill Kuthera PO Lehri Sarali Tehsil Ghumarwin Distt. Bilaspur H.P.174027						
2	12.07.2024	Mr. Kartik Sharma S/o Sh. Roop Lal Sharma Vill. Kulwari P.O. Kothi Tehsil Ghumarwin Distt. Bilaspur H.P. 174021						
3	12.07.2024	Smt. Nirmala Devi W/o Sh. Shyam Lal VPO Harlog Tehsil Ghumarwin Distt. Bilaspur HP 1740203						
4	12.07.2024	Miss Anu Kumari D/o sh. Subhash Chand V.P.O. Kheri Tehsil Sujanpur Distt. Hamirpur pin code- 176109 Mob.7876302421						
5	12.07.2024	Sh. Sanjay Kumar S/O Sh. Dhar VPO Chhainchhari (Khera) Tehsil Palampur Distt. Kangra pin 176086 Mob.7807026265						
6	12.07.2024	Sh. Akshay Jaswal S/o Sh. Mohinder Singh Jaswal Ward No.4 Padiyarkhar, Sri Sai University, Sungal, Tehsil Palampur Distt. Kangra H.P176061 Mob.9592905394						
7	12.07.2024	sh. Ankit Kumar S/o Sh. Subhash Kumar Vill. Natehar P.O., Tehsil & Distt. Kangra H.P176001						
8	12.07.2024	Miss Komal Devi D/o Sh. Jeevan Singh Vill. Kadroh P.O. Kherian Tehsil Nurpur Distt. Kangra H.P176202						
9	12.07.2024	Sh. Rajat Sharma S/o Sh. Ravi Dutt Sharma Vill. Kaulapur P.O. Chamukha Tehshil Rakkar Distt. Kangra H.P177033 Mob8263094756						
10 .	12.07.2024	Sh. Anil Kumar Rana S/o Sh. Mango Ram Rana VPO Barram Tehsil Jaisinghpur Distt. Kangra H.P176097 Mob.9805017254						
11	12.07.2024	Sh. Raj Kumar S/o Sh. Sita Ram Awasthi VPO Lahat Tehsil Jaisinghpur Distt. Kangra H.P176086 Mob. 9816356896						
12	12.07.2024	Sh. Mukesh Kumar S/o Sh. Jai Karan Dass Vill. Makroti P.O. Ladwara Tehsil Shahpur Distt. Kangra H.P176208						
13	12.07.2024	Miss Nisha Sharma D/o Sh. Bal Krishan Sharma Vill. Narwana Bazzar P.O. Yol Cantt. Tehsil Dharamshala Distt. Kangra H.P.176052						
14	12.07.2024	Miss Aarti Sharma D/o Sh. Hajinder Prasad Sharma H.No.222 Near Ek Jot Colony Ram Nagar P.O. & Tehsil Dharamshala Distt. Kangra H.P.176215						
15	12.07.2024	Miss Anjli Soni D/o Sh. Mohinder Lal Vill Hara P.O. & Tehsil Shahpur Distt. Kangra H.P. 176206						
16	12.07.2024	Miss Pooja Kumari D/o Sh. Onkar Chand VPO & Tehsil Shahpur Distt. Kangra H.P. 176206						
17	12.07.2024	Miss Jaiwanti Devi D/o Sh. Jiva Nand, Vill. Kathla, P.O. Gohar Tehsil Chachyot Distt. Mandi H.P175029						



18 12.07.2024		Smt. Manju Devi W/o Pritam Singh Village Dhoun(Kotdi), P.O. Rama, Tehsil Nahan Distt. Sirmour H.P173001 Mob.8219149450				
19	12.07.2024	Miss Meenakshi Uttam D/o Kumbh Dass VPO Daulatpur Chowk Tehsil Ghanari Distt. Una H.P 177204				
20	12.07.2024	Sh. Ashok Kumar S/o Sh. Ram Pal VPO Saloh Tehsil Haroli Distt. Una				

Director Health Services Himachal Pradesh



Department of Health and Family Welfare, Himachal Pradesh, SDA Complex, Shimla-9,

Counseling	held	on dated			at	State	Health	and	Family	Welfare	Training
Centre, Pari	mahal,	Shimla-171	009 to t	he post	of M	LT Gi	r-II(WE	XM)	on cont	ract basis	s through
Batch wise B											

BIO-DATA

Registration No. Employment Exchange, valid upto							Self Attested
Date							Passport .
1. Name of the post: Medical Laboratory Technician Gr-II (WEXM)							size
1. Ivaiii	e of the post. Medical Labo	ratory Tech	nician Gr-	-II (WEXM)		Photograp
2. Name	e of Candidate:	······································					
3. Fathe	er's Name:		Н	usband Nan	ne		
4. Date	of Birth:	•••••					
5. Age	as on date Year	Month.		Days			
6. Categ	gory:	Sub Categoria	ory:				
	nanent Address: -	1					
	pondence Address:						
9.Mobil	le Number	E-Mai	l(ID)				
10. Min	nimum Educational and other	r qualification	on require	ed for the p	ost of Medic	al Laborato	ory
Technic	cian Gr-II as per R&P Rules	:-:-					
Sr. NO.	Educational Qualification	Name of University/ Board/ Institute	Subject	Month and Year of Passing/ Batch	Maximum Marks	Marks Obtained	% of Marks
1.	10+2 Science						
2.	B. Sc. Medical Laboratory Technology/ B.Sc. Medical Technology Laboratory/ B.Sc. Medical Technology (Laboratory)/ B.Sc. Medical Laboratory Sciences/ B.Sc. in Medical Laboratory Technology (Lateral) from a recognized University or an Institution affiliated to a recognized University						

3. Registration in HP State Allied Healthcare Council/ HP Paramedical Council for above said qualification alongwith latest / valid renewal certificate.
11.Copy of valid SC/ST certificate on parental basis (if applicable) No.
Date
Whether Produced Yes/NO.
12. Copy of valid OBC certificate (If applicable) Yes/No
13. Copy of valid EWS, certificate (If applicable)
Yes/NoDate
14. Copy of valid WEXM, certificate (If applicable)
Yes/No
15.Copy of HP Bonafide Certificate. (If applicable) Yes/ NO
16. Copy of Character Certification from Executive Magistrate Yes/ NO
Tes/ NODate
16. List of Documents attached
17. DECLARATION
1. I
2. I
3. I have/had ever been offered the appointment as Pharmacy Officer by
the Department earlier.
Yes/ NO. (If Yes) Office Order NoDateJoined/ Not Joined.
4. Isolemnly affirm and declare that all the details given by me are true and
correct and nothing has been concealed therein. All the documents submitted by me are correct and obtained from the competent authority or Education Qualification passed from recognized Educationa Institution/ Board/University. If any discrepancy is found in my application form or any information is found falls at any stage then I shall be liable for all consequential actions including cancellation of candidature.
Place:
Date:
Signature of Candidate

(For office use only)

19.Eligible / Not el	igible	•••••	
20. Remarks of Sc	reening Committee ((if any).	•••••	
Member	Member	Member	Member

Chairman