Public Health Training School Thiruvananthapuram Dated; 24/09/2016 Phone:0471 2479492

Email: phtstvpm@gmail.com

Circular

Sub: PHTS –First& Final year DHIC/ Reappearance examination July 2016 result- publishing Ref: Board meeting held at Directorate of Health Services chamber on 23.09.2016

The Result of Diploma in Health Inspector Course (First and Final year) Reappearance Examination conducted in July 2016 is published herewith.

Those who have complaints or doubts about their result can apply for revaluation in The prescribed Proforma attached, along with a fee of Rs.150/-per paper Which is to be paid by way of DD in favour of Secretary, Paramedical Council payable at Thiruvanathapuram on or before 10.10.2016 Late applications will not be considered. Application for correction of misspelled names or other errors may be submitted by the candidate duly countersigned by the respective Principals along with the following documents.

- 1. True copy of School Leaving Certificate of the candidate attested by a gazetted officer
- 2. True copy of Hall Ticket attested by the Principal concerned.

Successful Candidates may obtain their mark lists from the respective institution where they have studied. After obtaining mark list they may submit application for Diploma in the prescribed Proforma along with attested copies of mark list and DD of Rs.100/- drawn in favour of Secretary, Paramedical Council. Those who wants Certificate of Diploma in person should submit a self addressed envelope having 16"x12" (40cm x 30 cm) size (cloth lined) with a postal stamp worth Rs.40/- along with the application.

Instead of Marklist candidates for revaluation may attach copies of downloaded statement of results from DHS website.

Sd/-Dr. K B Bindhu Principal/ Nodal Officer

To

The Principals of all Para Medical Institutions conducting DHI Course

^{*} Page 2 : Application for Revaluation

PARAMEDICAL COUNCIL

KERALA HEALTH SERVICES DEPARTMENT

Application for Revaluation of Answer Books of the Diploma in Health Inspector Course

Examinations						
Register No Year			To be sent by registered post			
Please attach downloaded statements of result of Subjects for which revaluation is required			Amount RsDD No Name of the Bank and Branch			
Date/ Month/ Year of Examination				Name of the bank and branch		
DHIC Exam First Year/Final Year						
1 . Nam	ne of the Can	didate				
2. Phone No.						
3. Male/Female						
4. Name of Examination, Month, Year						
(enc		with month & year nall ticket attested by				
took th	ne examinatio					
7. Subject(s) and Paper (s) for which Revaluation is required.						
SI No	1st year/2 nd year	Paper applied for	Marks obtained	Maximum mark	For office use only	
1						
2						
3						
4						
5						
8. Address to which revaluation result is to be communicated (in block letters) Place:						

Date:

Signature of the candidate