



Recruitment Notification-SDHM/05/2024

State Digital Health Mission/ eHealth Kerala, Department of Health & Family Welfare, Government of Kerala invites applications from eligible candidates for recruitment under the eHealth Kerala project on deputation basis for the post of **Programme Officers**. eHealth is one of the most important mission mode projects that is being executed by Dept of Health & FW, Government of Kerala.

Name of the Post	Programme Officer
No of Vacancies	3 Nos
Mode of appointment	Deputation (DHS/DME)
Qualifications	Any Degree
Desirable Qualification	PG Diploma in e Governance/PG Diploma in Hospital Administration.
Age	As per prevailing Govt rules
Experience	5 years

Note: The Selected candidate will be posted at the eHealth Project Management Unit at Thiruvananthapuram.

Schedule of events: - Last date for Submission of applications: within 20 days from the date of notification.

Eligibility Criteria

1. The applicants intending to apply should ensure that they fulfill the eligibility criteria specified herein below before applying.
2. NOC from parent department is a mandatory criterion.

How to apply: Applications shall be sent to **ehealth@kerala.gov.in** in the prescribed format. **Physical application WILL NOT be accepted.**

Important Note: *Physical application WILL NOT be accepted under any circumstances.*

Nationality: Applicant must be a citizen of India.

Selection Criteria

1. The selection of candidates to the notified positions shall be based on personal interview conducted. eHealth reserves the right to cancel the recruitment process at any stage without citing any reasons thereof.
2. Canvassing in any form by an applicant will lead to his / her disqualification in the selection process.
3. The applicants are advised in their own interest that they should not furnish any false, tampered, or fabricated particulars/documents and should not suppress any material information while applying.
4. Educational qualification for above mentioned posts should be recognized by Government of Kerala.
5. Claims in respect of qualifications/experience and etc. should be supported by copies of relevant documents; candidates may be required to produce the originals at the time of interview/ certificate verification process.
6. If an applicant is found guilty of using unfair means during the selection process and/or impersonating or procuring impersonation by any person and /or misbehaving and / or resorting to any irregular or improper means in connection with his/her candidature and/ or obtaining support for his/her candidature, by any means, he/ she shall be disqualified from the selection process for which he/ she is a candidate.

Qualification and Experience: It should be noted that the eligibility criteria specified herein is the basic qualification for applying for the positions. However, merely applying for / appearing for and/or qualifying at any stage of the selection process for the positions does not imply that a candidate will necessarily be eligible for employment / confer rights on him / her for appointment in the notified position.

Address for correspondence:

The Project Director
State Digital Health Mission/ eHealth Kerala
Directorate of Health Services,
General Hospital Junction
Thiruvananthapuram- 695035
Contact Office No :**0471 2998033**

Dr. Vinay Goyal.IAS
Project Director
eHealth Kerala/SDHM

APPLICATION FOR THE POST OF

Paste your recent
color passport size
photograph

FIRST NAME :

MIDDLE NAME :

LAST NAME :

DATE OF BIRTH :

GENDER :

FATHER'S NAME :

PERMANENT ADDRESS :

PRESENT ADDRESS :

(If different from above)

STATE :

POST CODE :

MOBILE NUMBER :

E-MAIL :

NATIONALITY :

MARITAL STATUS :

IDENTITY PROOF :

ID PROOF NUMBER :

ACADEMIC BACKGROUND :

Examination Passed	Discipline/ Specialization	Name of School/College/ Institute	Board/University	Year of Passing	Marks in %	Class/Grade

DETAILS OF WORK EXPERIENCE :

(Starting with the most recent)

From Date	To Date	Months/ Years	Employer	Designation	Job Profile

SUMMARY OF YOUR EXPERIENCE :

EXTRA CURRICULAR ACTIVITIES :

DISTINCTION, HONORS, ACHIEVEMENTS :

AWARDS RECEIVED (Academic and Community) :

DECLARATION:

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief.

PLACE:

NAME

DATE:

SIGNATURE