

Advertisement
Addiction Treatment Facilities under Civil Surgeon Fatehabad

Advertisement No. – ATF/10/2025/FTB

Date of Advt.: 17-10-2025

Re-advertised Advt. No 08/2024/ATF

ATF (Addiction Treatment Facilities) Scheme invites application for the contractual staff under the ATF Scheme for Civil Hospital Tohana of District Fatehabad purely on contract basis initially up to 31/03/2026. The number and details of this post is as under:

Sr. No	Institute Name	Name of Post	No of Post and category	Minimum Qualification	Salary P.M. (Fixed)
1	SDCH Tohana	Medical Officer	01-UR	MBBS from a recognised institution along with medical council registration (preferable MD of equivalent qualification in psychiatry)	60000/-
2	SDCH Tohana	Nurse	01-UR	ANM (preferable GNM/B.Sc Nursing)	20000/-
3	SDCH Tohana	Counsellor	01-UR	Graduate in psychology/Social Work/Sociology (preferable Masters in above disciplines)	20000/-
4	SDCH Tohana	Data Manager	01-UR	Graduate (preferably with qualification/experience in computer applications)	15000/-

IMPORTANT PROVISIONS / INSTRUCTIONS

1. Applications will be accepted from dated 17th October 2025 to 30th October 2025 at 4:00 PM for all the posts & should be addressed to Civil Surgeon Fatehabad, HUDA Sector-3 Polyclinic Building Fatehabad Haryana Pin-125050. Name of post, Post Cat. No. as mentioned in the advertisement should be mentioned on the envelope. The application form without having the post name and category no. of post will be rejected. Application with cutting shall also be rejected. The applicant must mention the details of certificates attached with application and sign the application at designated places. Candidates will number all the Papers/Documents attached with application form and mention the number of pages in the application form.
2. Application forms will be accepted by registered post/by hand. This office will not be responsible for any postal delay.
3. The application form with all the documents should reach in the O/o Civil Surgeon, Fatehabad up to Closing Date 30th October 2025 at 04:00 P.M.
4. The candidate should give details of all the examinations passed from Matriculation or its equivalent onwards and mention total and percentage of marks obtained and maximum marks in each examination. The candidates are advised to attach self-attested photocopy of essential qualification certificates / diploma / degree / DMC / Exp. Certificate / Registration Certificate/ Cast Certificate/ Certificate of Residence proofs with the application form. Application form should be complete in all respects duly filled in by the candidates in their own handwriting in capital letters and signed by the candidate.
5. Applicant can apply for more than one post, mentioning name of Scheme/Program for which he/she applied. Separate Application should be submitted for separate post and program as mentioned in advertisement
6. Application Format can be downloaded from the link nhmfatehabad.org.in. No other formats will be accepted.
7. Each application must be duly signed by the applicant and self-attested certified copies of documents should be attached with application form. Self-attested photograph of the applicant must be pasted at the designated place of photograph.

8. Applicants who have already applied in Advt. No No 08/2024/ATF Dated 13-08-2024 are also required to apply fresh application as per revised selection criteria. Previously application submit by any candidate will not considered as new application.
9. Applicants who have already applied for the form and paid the amount should attach a copy of the amount deposited earlier with the application form. They should not pay the fees again.
10. Application fee Rs. 300/- for each category. Candidate should submit the above fee in the account as detailed below: -

Account No.: 100059775729

IFSC Code: INDB0000759

Account Holder Name: - District Health & Family Welfare Society, Fatehabad (User Money)

Bank Name :- INDUSIND BANK, Fatehabad Branch

This fee is Non Refundable. Candidate should attach the 2 copies of acknowledgement slip of fee Submitted by him/her with the application form.

Note: - Application fee can be submitted through Any UPI /Google Pay/ Paytm / Phone Pay.

11. Candidates will mention the name, father's name, post category and address on the remarks of UPI Payment Mode (Any UPI /Google Pay/ Paytm / Phone Pay).
12. Relevant Post's Qualification Experience as per MD NHM vide their office letter no NHM/Admin/HRC-1/2025/4264-75 dated 06-05-2025
13. Date of Advertisement will be considered for calculation of Maximum Age. Age limit for all above posts should be 18 to 42 Years.
14. Residence proof: Any 3 Document from the below mention list should be produced to avail weightage for the District Fatehabad.

Only the following documents shall be accepted as proof of residence

Sr. No	List of Documents for Proof of Address (residential proof)(Any Three)
1	Passport
2	Voter ID card
3	Ration card with Address
4	Caste and Domicile Certificate with address and the photo issued by State Govt.
5	Parivar Pehchan Patra (PPP)
6	Electricity Bill (not older than last three months)

- Applicant must be permanent resident of Haryana (Bonafide domicile certificate from executive magistrate should be furnished).

Note: Any three, out of the above documents in original (No. 01 to 06) be produced at the time of recruitment.

15. Unsigned applications without required documents and application received after last date will be rejected.
16. Service Bye laws of NHM not applicable for all the posts under ATF.
17. NHM Selection Criteria shall be followed in the selection process as per letter received from MD NHM vide their office letter no NHM/Admin/HRC-1/2025/4264-75 dated 06-05-2025 and any amendment issued by higher authorities time to time.

Sr. No	Existing Components	Weightage	Marking Pattern
1	Essential basic qualifications	30	30xPercentage 100
2	<ul style="list-style-type: none"> Post qualification relevant work experience in same field in any State Govt./Semi Govt./UT/any Govt. Board/Corporation/NHM /SACS shall be considered. <p style="text-align: center;">OR</p> <ul style="list-style-type: none"> Post Qualification relevant work experience in same field in private hospitals/Labs, which are JSI/NABH/NABL accredited /ISO certified and any other nationally accredited Health Institution only will be considered/admissible at par with Govt. Facilities 	10	02 marks for each completed year (maximum 10 marks)

3	Local area Weightage = 10 Weightage of marks (for Haryana applicants): 10 marks for the candidate be a bonafide resident of Haryana (Haryana resident certificate/Domicile) Weightage of marks for "out of the State applicants": Zero(O) marks	10	
	Total Marks	50	

- ✓ Applicant should have passed Hindi/ Sanskrit up to Matric.
 ✓ Age as per Haryana Govt. policy.
18. Some posts are subject to clarification from State Headquarters in which case any post can be cancelled as per their direction.
NOTE: - 1. NOC from present employer (any State Govt./Semi Govt./UT/any Govt. Board/Corporation/NHM/Central Govt.) should be attached with application form.
2. Experience should be obtained after essential qualification.
19. Candidates applying for a post must ensure that they fulfill all the eligibility conditions on the last date of application. If it is found that applicant does not fulfill any of the eligibility condition or information given by Candidate is false or incorrect then their candidature/Appointment will be cancelled and selection terminated.
20. If a Candidate has passed his/her education from Private/Deemed University, then he/she has to submit UGC approved certificate for University and Course for the period of concerned year of passing.
21. If a Candidate has passed his/her education through Distance Mode/Open Mode, then he/she has to submit DEB UGC approved certificate for University and Course for the period of concerned year of passing.
22. The applicants are advised to visit the site for any change in schedule or the status of their application on website only. They are not to visit the office of undersigned or contact any person in this office for the same. Any candidate found canvassing or influencing the selection process or approaching the selection committee or any person related to the working of this shall be disqualified and his candidature rejected immediately without giving any reason. Any person or candidate found using unfair means to influence the selection process shall be debarred from selection and candidature rejected.
23. Any applicant having his relative posted in the department must inform beforehand about the same. Concealing of any information shall debar the candidate from selection process and his candidature rejected.
24. If at any stage it comes to the notice of selection committee that wrong information has been supplied by the candidate his selection shall be cancelled and legal proceedings shall be instituted against the candidate.
25. District authorities has right to correct any clerical mistake found at later stage of recruitment process. Applicant shall not claim for such clerical mistakes.
26. Contract may not be renewed automatically and Civil Surgeon has the right to terminate the contract immediately if performance is found unsatisfactory.
27. Selected candidate shall not have any claim for regularization of his/her services based on the duties performed under this contract.
28. There is no provision to allow private practice after duty times or on holidays to staff recruited.
29. Person having any criminal case pending against him/her in any court of law will not be eligible to apply for these posts.
30. The candidates whose services have been terminated from any Govt. /Semi Govt. /Corporate Board on disciplinary basis will not be eligible. Person whose enquiry pending in criminal case/FIR is lodged will also be considered as not eligible.
31. For any other information regarding this advertisement kindly check official web page nhmfatehabad.org time to time. No further information will be given in any newspaper and individually every applicant.
32. It is mandatory for staff to maintain Head Quarter and reside at the Place of Posting.
33. District authorities has right to correct any clerical mistake found at later stage of recruitment process. Applicant shall not claim for such clerical mistakes.

--SD--

Chairman, Executive Committee
 District Health and Family Welfare Society Fatehabad

District Health & Family Welfare Society, Fatehabad

Application Form for Advertisement No.:- 05/2017/PATF /10/2025/FTB

(All supporting Documents/Certificates are required to be attached with Application Form)

To be Filled by the Candidate

Application for the Post		Latest Passport size attested Photo
---------------------------------	--	--

1.	Personal Information	
1.1	Name of the Candidate(In Capital Letters)	
1.2	Father's Name(if unmarried)/ Husband's Name (If Married)	
1.3	Date of Birth(Date/Month/Year)	
1.4	Marital Status (Single/Married/Other)	
1.5	Permanent Address (With PIN Code)	
1.6	Category (Gen/SC/BC/EWS etc.)	
1.7	Mobile/Contact No.	
1.	E-mail Address (in capital letters)	

Academic /Professional Qualifications (Starting from Highest Degree) (Attach Additional Sheet, if Required)

Degree / Class	Name of University/ Institute/ Board	Passing Year	Status of Marks			Name of Subject Studied
			Total	Obtained	% or CGPA	

3.	Work Experience (Should be Govt./Semi Govt. also salary should be mentioned) (Attach certificate)			
Designation /Job Role	Period of Job		Gross Salary	Name of Organization/Institution/Department
	From	To		

4. Any Other Information, the Candidate would like to give in support of her/his candidature(Attach Additional Sheet, if Required)

5.	Weather any relative working in Health Department	Yes/No	If yes Name	Name Health Institution:-
-----------	---	--------------------------	-------------------------------	---

Declaration:

All Information given in the Application Form is correct and true to the best of my knowledge. My candidature may be rejected, if found any information incorrect/false/misleading and any Civil/Criminal legal action can be taken against me for this.

Date:

(Signature of the Candidate)

(To be filled by the candidate) (Attach Additional Sheet, if Required)**List of Document attached:-**

- 1.....
- 2.....
- 3.....
- 4.....
- 5.....
- 6.....

- 7.....
- 8.....
- 9.....

Bank Draft
No

Amount

Name of
BankDate of
DD

Date:

(Signature of the Candidate)