

GOVERNMENT OF ANDHRA PRADESH
DISTRICT MEDICAL AND HEALTH OFFICE, KURNOOL
NOTIFICATION NO : 05/ASHA/PODTT/KNL/2025

FILLING UP OF THE POSTS OF RURAL & URBAN ASHA'S TO WORK IN PHCs & UPHCs of KURNOOL DISTRICT.

- 1) Offline applications are invited from the eligible candidates for filling the following No. Of posts in Primary Health Centres (PHCs) & Urban Primary Health Centres (UPHCs) of Kurnool District, as per Rc.No:1359/RCH-II/S1/ASHA/2011 dated: 07.04.2025 of the CH&FW, A.P., Mangalagiri , GUNTUR.

2) **Vacancies:**

S.No.	Name of the Division	Rural Asha Vacancies	Urban Asha Vacancies
1	KURNOOL	4	7
2	ADONI	19	4
3	PATHIKONDA	9	0
	YEMMIGANUR (ULB)	0	1
	TOTAL	32	12
	Grand Total	44	

3) **Dates for submission of Applications:**

- A. The starting date for submission of applications with all relevant documents is **24-06-2025 to 28-06-2025**.
- B. The last date for submission of applications is **28-06-2025** by 5 PM at the Concerned Medical Officers of the PHCs & UPHCs (Vacancy areas - PHCs & UPHCs)

4) **Education Qualifications:**

Sl. No.	Name of the post	Requisite Qualifications	Performance -based Incentive(Honorarium)
1	ASHA	10 TH CLASS	Rs.10,000/-

5) **AGE:**

The age should be in between 25 to 45 years as on 31.05.2025.

6) ELIGIBILITY CRITERIA:-

- Asha must be a woman permanent resident of the village in Rural areas and Urban Secretariats in Urban areas
- To be as a daughter in law of that vacant areas.
- Preferably Widow /Divorced Women.
- Minimum Educational Qualification shall be 10th pass.
- Fluency in Telugu Reading and Writing with effective communication skills and leadership qualities.

7. METHOD OF SELECTION:

Selection process based on the 10 th class marks merit.

8. FEE:

The candidates applying for the posts should invariably pay Fee at Rs: 200/- to be credited into the Bank **Account No: 10937213320** of the **PROJECT OFFICER, DISTRICT TRAINING TEAM, KURNOOL** At State Bank of India , Treasury Branch, Kurnool **IFSC Code: SBIN0006305**. The bank receipt should be submitted along with the Application form. Demand Drafts/ Bank Cheques/Individual cheques **will not be accepted.**

9. HOW TO APPLY:

- A.** Candidates shall apply only through off line.
- B.** The start date for submission of applications with all relevant documents is from **24-06-2025 to 28-06-2025**
- C.** The last date for submission of application is **28-06-2025** by **5.00 PM** at the Concerned Medical Officers of the PHCs & UPHCs (Vacancy areas - PHCs & UPHCs)

10. The following documents should be submitted along with the application:

- a)** SSC Marks certificate issued by Board of secondary education, Andhra Pradesh.
- b)** Ration card as a proof of Marriage.
- c)** Resident Certificate attested by Panchayat Secretary of Concerned Rural Secretariats and Ward Administrator of Concerned Ward Secretariats.
- d)** Divorced- Court Copy.
- e)** Widow – Husband Death certificate
- f)** Aadhaar Card
- g)** Fee Receipt

INSTRUCTIONS:-

- a. The appointments are purely on temporary during her service basis and liable for termination at any time.

11. DEPARTMENT:

- a) Candidates should make sure of their eligibility to the post applied for and that the declaration made by them in the format of application regarding their eligibility in all respects. Any candidate furnishing in- correct information or making false declaration regarding her eligibility at any stage or suppressing any information is liable to be debarred from recruitment conducted by the Department and summarily rejection of their candidature for this recruitment & future recruitments.
- b) The Department is vested with duty of conducting recruitment and selection as per rules duly maintaining utmost secrecy and confidentiality in this process and any attempt

The Act by any one causing or likely to cause breach of duty in such manner or by such action as to violate or likely to violate the fair practices followed and ensured by the Department will be sufficient cause for rendering such questionable means ground for department.

12. DEPARTMENT'S DECISION TO BE FINAL:

The decision of the Department pertaining to the application and its acceptance or rejection as the case may be conduct of counseling and at all consequent stages culminating in the selection or otherwise of any candidate shall be final in all respects and binding on all concerned under the powers vested with it. The Department also reserves its right and can modify regarding time and conditions laid down in the notification for conducting the various stages up to selection duly intimating details thereof to all concerned as warranted by any unforeseen circumstances arising during the course of this process.

13. Time schedule for processing and completion of the Recruitment:

Sl.No.	Process	Date
1	Issue of Notification	23-06-2025
2	Call for applications	24-06-2025 to 28-06-2025
3	Scrutiny of applications	30-06-2025 to 03-07-2025
4	Display of Merit list	04-07-2025
5	Receiving Objections/grievances	05-07-2025 & 07-07-2025
6	Display of Final Merit list	08-07-2025
7	Issue of Appointment Orders	10-07-2025

14. District Selection Committee Members:

- i. Collector and District Magistrate, Kurnool - Chairman
- ii. District Medical & Health Officer, Kurnool - Member Secretary – Convener
- iii. Project Director, W&CW Dept & ICDS Project , Kurnool - Member
- iv. Dist. Coordinator of Hospital Services, Kurnool - Member

Collector & District Magistrate
Kurnool

DM&HO
Kurnool

PODTT/DIO
Kurnool

DPHNO
Kurnool

APPLICATION FORM

(FOR FILLING UP OF THE POSTS OF ASHA'S TO WORK IN RURAL & URBAN WARD
SECRETARIAT'S / VILLAGES OF P H C S & UPHCs OF KURNOOL DISTRICT)

NOTIFICATION NO : 05/ASHA/PODTT/KNL/2025

REGISTRATION NO:
(TO BE FILLED BY THE OFFICE)

APPLICATION FOR THE POST OF:

1.	Name of the candidate:		Paste Photograph here and sign across it
2.a	Name of the Father		
2.b	Name of the Husband		
3.	Widow / Divorced	YES/NO	
4.	Gender		
5.	Date of Birth, Age		
6.	Social Status (OC/SC/ST/ BC-A,B,C,D,E)		
7.	Name of the requisite qualification the applicant passed		
8	Marks obtained in the qualification	Maximum Marks : Marks obtained:	
9	Mobile Number of the candidate		
10	Bank Receipt		

ADDRESS OF THE CANDIDATE:

SIGNATURE OF THE APPLICANT

DECLARATION

I, SMT/KUM/SRI.....
D/O/W/O..... CERTIFY THAT ABOVE
PARTICULARS FURNISHED BY ME ARE CORRECT TO THE BEST OF MY
KNOWLEDGE. I ALSO AGREE THAT IN THE EVENT OF ANY OF THE
PARTICULARS FURNISHED IN MY APPLICATION BEING FOUND TO BE
INCORRECT OR FALSE AT A LATER DATE MY CANDIDATURE WILL BE
CANCELLED SUMMARILY.

Name & Signature of the Candidate

CHECK LIST

S.NO	ENCLOSURES	STATUS
1	Filled in application form with latest Passport size photo affixed	YES/NO
2	Self attested copy of SSC Marks certificate issued by Board of secondary education, Andhra Pradesh	YES/NO
3	Resident Certificate attested by Panchayat Secretary of Concerned Rural Secretariats and Ward Administrator of Concerned Ward Secretariats	YES/NO
4	Self attested copy of Divorced court copy	YES/NO
5	Self attested copy of Husband Death certificate for Widow	YES/NO
6	Self attested copy of Aadhaar card	YES/NO
7	Self attested copy of Ration Card	YES/NO
8	Fees receipt	YES/NO

Signature of the Candidate