



भारत सरकार / GOVERNMENT OF INDIA



स्वास्थ्य एवं परिवार कल्याण मंत्रालय / Ministry of Health and Family Welfare

अपर निदेशक का कार्यालय / Office of the Additional Director

केन्द्रीय सरकार स्वास्थ्य योजना / Central Govt. Health Scheme

नांग्रिम हिल्स शिलांग - 793 003 / Nongrim Hills, Shillong - 793 003

Tele-Fax - 0364 - 2520626

Email ID - ad.cghs-meg@gov.in

No. CGHS/ESTT/DAVP/1/1995

Dated: 11th December, 2025

NOTIFICATION

Advertisement for engaging retired clerical employee & pharmacist (Allo.) from Central Govt./State Govt./PSUs/Autonomous Bodies for engaging on contractual basis (purely temporary).

Applications are invited from the retired clerical employee & pharmacist (Allo.) from Central Govt./State Govt./PSUs/Autonomous Bodies for engaging for the posts of Junior Health Administrative Assistant (JHAA)/LDC & Pharmacist (Allo.) on contract basis (purely temporary) for a period of 180 days.

Details are as tabulated below:

Place of posting	CGHS Shillong	CGHS WC Imphal
Vacancy	JHAA/LDC - 02	Pharmacist (Allo.) - 01

TERMS AND CONDITIONS

- Officials retired from Central Government/State Government/PSUs/ Autonomous bodies should only apply. Applications received from candidates who are not retired from Central Government/State Government/PSUs/ Autonomous bodies shall be summarily rejected.
- Duration of appointments will be purely on Contractual basis for a period of 180 days or till regular incumbents join whichever is earlier.
- Only consolidated remuneration as per D.O.E OM No. F.No.3-25/2020-EIHA dt 09/12/2020.
- Age limit - not exceeding 64 years as on the last date of submission of application.
- Leave- Leave will be eligible for 8 days in a calendar years on pro-rata basis. Therefore, the employee shall not draw any remuneration in case of absence beyond 8 days in a calendar year (calculated on pro-rata basis).
- The appointing authority, Additional Director, CGHS Shillong shall have the right to cancel or terminate or withdraw or modify the advertisement or contract at any time without assigning any reasons whatsoever in public interest on behalf of the Govt. of India.
- Date of interview and verification of original documents will be informed to the eligible candidates later on. The candidates to produce all original Certificates/documents on the date of Interview.
- The Candidates are required to make their own arrangement for attending interview.

HOW TO APPLY

- The application form is attached herewith. Candidates are advised to fill in the application form carefully. The applicants should provide valid E-mail ID for smooth and fast communications.
- The filled in Application form in plain paper as per below format along with attested copies of Age proof, P.P.O., etc should be sent to The Additional Director, CGHS, Nongrim Hills, Shillong - 793 003 (Meghalaya) or e-mail: ad.cghs-meg@gov.in within 15 days from the date of publication of the advertisement.
- The Envelope containing the application should be superscribed as "Application for the post of Junior Health Administrative Assistant (JHAA)/LDC (Contract basis)."
- Mandatory Enclosures - Self attested photocopies of Pension Payment Order, any document/certificate of Retirement who have No. PPO, Age proof Certificate (attested copy of Certificate showing age), Educational Qualification Certificates, 02 (two) recent passport size photographs, Experience Certificates (wherever applicable).

Additional Director
CGHS, Shillong.
(SAG)
सी जी एच एस, शिलांग
CGHS Shillong

APPLICATION FORM

POST APPLIED FOR : _____

Passport size
color
photograph

1. Name of Applicant :
(in capital letters)
2. Father's /Mother's Name :
3. Name of the Department from :
which retired
4. Date of retirement from service:
5. Post held while in service last :
6. Details of service rendered :
(Work experience)
7. CGHS City/Wellness Centre :
For which applied

8. Date of Birth (DD/MM/YYYY) :

DD	MM	YYYY

9. Sex (Male /Female) :

10. Address for communication : _____

11. Contact Number :

12. E-mail ID (Mandatory) :

13. Educational Qualification

Sl. No.	Name of Examination	Qualifying Year	Board/Council/ University

I, do hereby declare that the particulars furnished above are true and correct to the best of my knowledge and belief. I have properly read and understood the advertisement and I am ready to accept all the terms and conditions for engagement in the above post on contractual basis

Date:

Place: _____

Signature of Applicant