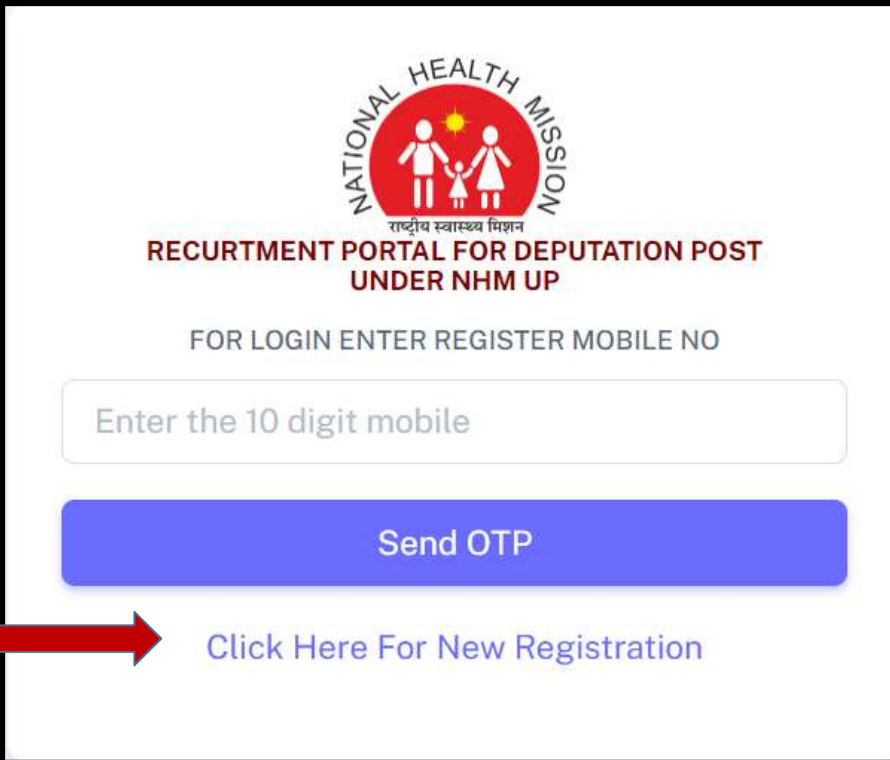



# User Manual of Recruitment Portal On Deputation Post Under NHMUP

# Registration page

- Url: [http://52.66.203.8/nhm\\_jobs/](http://52.66.203.8/nhm_jobs/)

- For first-time registration click on **“Click here for new registration”**



  
राष्ट्रीय स्वास्थ्य मिशन

**RECURTMENT PORTAL FOR DEPUTATION POST  
UNDER NHM UP**

FOR LOGIN ENTER REGISTER MOBILE NO

**Send OTP**

[Click Here For New Registration](#)

# Registration Form

**Note: If the applicant has both the degree MBBS & MBA ,then select MBBS in essential qualification.  
If the applicant has both the degree BDS & MBA ,then select BDS in essential qualification.**

- Select the position applying for
- Select the essential Qualification
- Type Full Name
- Provide DOB
- Type Mobile Number
- Provide Email Id
- Type Captcha
- Click on submit

Candidate Registration For  
Deputation Position Under  
NHMUP

POSITION APPLYING\*  
--SELECT POSITION NAME--

ESSENTIAL QUALIFICATION\*  
--SELECT--

FULL NAME (AS PER GOVT. ID)\*  
Name

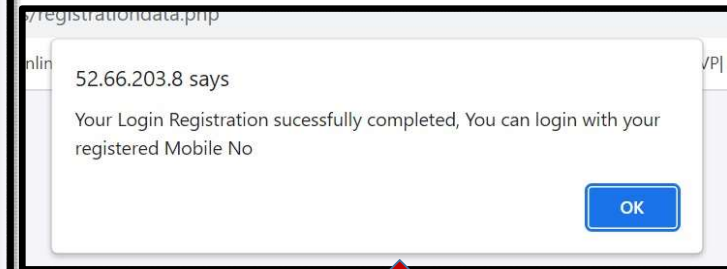
DATE OF BIRTH\*  
[Date Picker]

MOBILE NO\*  
Mobile No

EMAIL ID\*  
Email

[Captcha: 9c9cbc]

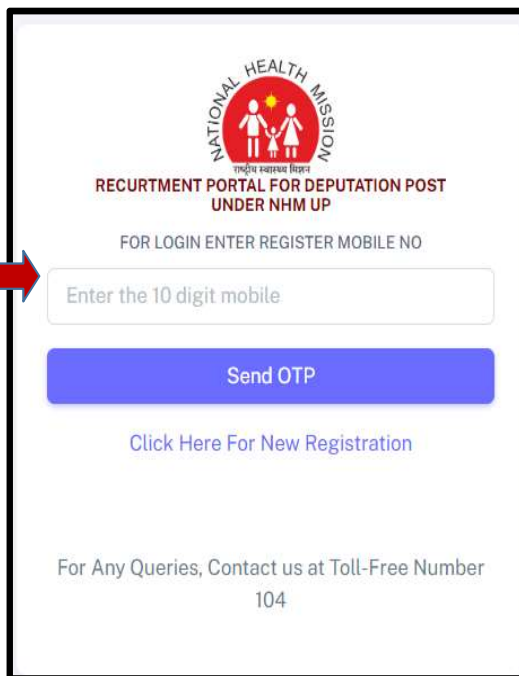
Submit



- Post-registration

# Login page

Enter the **mobile number** submitted during registration and click on “**Send OTP**”



NATIONAL HEALTH MISSION  
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RECURTMENT PORTAL FOR DEPUTATION POST  
UNDER NHM UP

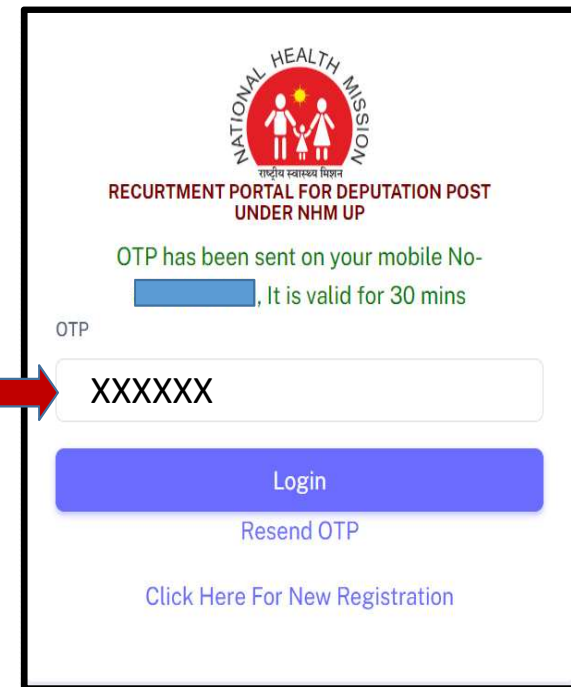
FOR LOGIN ENTER REGISTER MOBILE NO

Send OTP

[Click Here For New Registration](#)

For Any Queries, Contact us at Toll-Free Number  
104

Type **OTP** for login  
(Sent on your mobile number submitted during registration)



NATIONAL HEALTH MISSION  
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RECURTMENT PORTAL FOR DEPUTATION POST  
UNDER NHM UP

OTP has been sent on your mobile No-  
[REDACTED], It is valid for 30 mins

OTP

Login

[Resend OTP](#)

[Click Here For New Registration](#)

# Entry Page-1

Fill the required data field and click on Next

- Father/Husband Name
- Gender
- Address detail (Current and Permanent)
- Education qualification/Details
- Current Organization details

**Personal & Qualification Details**

Candidate Name: [Redacted]      Position Applied: General Manager  
Mobile No: [Redacted]      Email id: [Redacted]  
DOB: [Redacted]      Age: [Redacted]  
Essential Qualification: MBBS      Father Name/Husband Name\*  
[Redacted]

Add Preference for various General Manager Post (1 to 8) :-

|                               |  |   |
|-------------------------------|--|---|
| RBSK<br>[Redacted]            | RKSK<br>[Redacted]                           | Community Process<br>[Redacted]   |
| Family Planning<br>[Redacted] | Blood Cell<br>[Redacted]                     | Child Health<br>[Redacted]  |
| Planning<br>[Redacted]        | Training and Capacity Building<br>[Redacted] | For GM Training and capacity Building (Min. 5 years of exp. in training and development)*<br>--Select-- |

Permanent Address \*  
[Redacted]      State \*  
--Select--  
District \*  
--Select--

Same as permanent address

Current Address \*  
[Redacted]      State \*  
--Select--  
District \*  
--Select--

Gender \*  
--Select--      PAN Number \*  
[Redacted]

**Educational Qualification/Details**

| Exam Passed     | Name of Institute/College | Board/University | Year of Passing | Marks Obtained | Total Marks | % Marks    |
|-----------------|---------------------------|------------------|-----------------|----------------|-------------|------------|
| 12th            | [Redacted]                | [Redacted]       | [Redacted]      | [Redacted]     | [Redacted]  | [Redacted] |
| 10th            | [Redacted]                | [Redacted]       | [Redacted]      | [Redacted]     | [Redacted]  | [Redacted] |
| Degree/Diploma* | [Redacted]                | [Redacted]       | [Redacted]      | [Redacted]     | [Redacted]  | [Redacted] |
| PGDf and)       | [Redacted]                | [Redacted]       | [Redacted]      | [Redacted]     | [Redacted]  | [Redacted] |

Desirable Qualification  
--Select--      Council from where registered \*  
--Select--

Council Reg No \*  
[Redacted]      Type of Organization (Currently Working) \*  
--Select--

Name of the Organization \*  
[Redacted]      Current Grade Pay \* - 7000-8700  
--Select--

**NEXT**

# Entry Page-2

- Fill the required data field
- Upload the required documents
  - Photo
  - Signature
  - Council registration certificate (If applicable)
  - High school certificate
  - Essential degree diploma certificate
- Click on declaration
- Click on submit

Welcome [redacted] Log Out

### Work Experience & Upload Details

Add Experience (Start from current experience)

| Type of Organization * | Name of Organization * | Service start Date* | Service End Date* | Grade Pay* | Experience |
|------------------------|------------------------|---------------------|-------------------|------------|------------|
| --Select--             |                        |                     |                   | --Select-- |            |

Upload Files (Files not more than 500kb)

|   |   |  |
|---|---|--|
| Photo Uplaod (only image-jpg,png)*                      | <input type="button" value="Choose File"/> No file chosen | <input type="button" value="Upload Photo"/>            |
| Sign Uplaod (only image-jpg,png) *                      | <input type="button" value="Choose File"/> No file chosen | <input type="button" value="Upload Sign"/>             |
| Council Registration Certificate Uplaod (only PDF Only) | <input type="button" value="Choose File"/> No file chosen | <input type="button" value="Upload Certificate"/>      |
| High School certificate/Mark sheet (only PDF Only)*     | <input type="button" value="Choose File"/> No file chosen | <input type="button" value="Upload Marksheet/Certif"/> |
| Graduation final degree/ mark sheet (only PDF Only)*    | <input type="button" value="Choose File"/> No file chosen | <input type="button" value="Upload Marksheet/Certif"/> |



"I, [redacted], hereby declare that all the details submitted by me in the form is correct, true, and valid."

**Note:** After choosing required document files click on Upload button to upload.  
Click on Add experience button after filling experience ( Applicant can add multiple experience).

# Application Print

Dear Applicant, Your Application form has been Submitted Successfully for the post of General Manager. Your Application No. NHMDEP23 You are requested to take out the print and keep it safe for further communication - Thankyou NHMUP

**Recurtment on Deputation Post Under NHM UP**

|  |   |                      |   |                  |  |         |
|--|---|----------------------|---|------------------|--|---------|
| Application No: [REDACTED]   |  |                      |   |                  |  |         |
| Applied Position: [REDACTED]   |   |                      |   |                  |  |         |
| Candidate Name: [REDACTED]   |   |                      |   |                  |  |         |
| Mobile No: [REDACTED]  |   |                      |   |                  |  |         |
| Father/Husband Name :- hsdgt   | DOB :- 20   | [REDACTED]           |   |                  |  |         |
| Email Id: [REDACTED]   | Age :- 18   | [REDACTED]           |   |                  |  |         |
| Gender :- Male   | PAN No: [REDACTED]  |                      |   |                  |  |         |
| Permanent Address :- bugasfrsf6gbajxn  | Current Address :- bugasfrsf6gbajxn   |                      |   |                  |  |         |
| District :- Pathanamthitta   | Current District :- Pathanamthitta  |                      |   |                  |  |         |
| State :- Kerala  | Current State :- Kerala   |                      |   |                  |  |         |
| Essential Qualification :- Degree in Ayurveda  | Desirable Qualification :-  |                      |   |                  |  |         |
| Council from where registered :- Others-hbagsgbahb   | Council Reg No. :- 87646h   |                      |   |                  |  |         |
| Name Of Organization :- aldspt   | Type of Organization (Currently Working) :- State Government                        |                      |   |                  |  |         |
| Grade Pay :- Yes 7600-8700   |   |                      |   |                  |  |         |
| <b>Educational Qualification/Details</b>   |   |                      |   |                  |  |         |
| Exam Passed  | Name of Institute/college   | Board/University     | Year of Passing                                 | Marks Obtained   | Total Marks  | % Marks |
| 10th   | mkmd  | nwdkd                | 2009  | 12               | 20   | 60.00   |
| 12th   | nwju  | jijjd                | 2011  | 13               | 20   | 65.00   |
| Degree /Diploma  | ja  | ask                  | 2015  | 12               | 20   | 60.00   |
| PG(D any)  |   |                      |   |                  |  |         |
| <b>Experience</b>  |   |                      |   |                  |  |         |
| SN   | Type of Organization  | Name of Organization | Service start Date                              | Service End Date | Experience   |         |
| 1  | Central Government  | gogsgsgd             | 2015-08-05                                      | 2023-08-08       | 8 Y  |         |
| Total Experience:-8Y 0M  |   |                      |   |                  |  |         |
| Council Registration Certificate Upload:- Yes  |   |                      | High School certificate/Marksheet Upload :- Yes |                  |  |         |
| Graduation final degree/Marksheet Upload :- Yes  |   |                      | PG Degree/Diploma Upload :- No                  |                  |  |         |
| *I, [REDACTED], Hereby declare that all the details submitted by me in the form is correct, true and valid. If any mismatch found in the aforesaid information provided by me, the organization may cancel my candidature or may initiate appropriate Legal action.* |   |                      |   |                  |  |         |
| Date: 23-08-2023   |   |                      |   |                  |  |         |
|  |   |                      |   |                  | <br>Signature |         |

Request for change or correction of any information shall not be entertained once online form is successfully Final Submitted

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