

No. 70-2/2020/CDB
Government of India
Ministry of Health & Family Welfare,
Department of Health and Family Welfare

Nirman Bhawan, New Delhi
Dated

Walk in Test for CAD Operators

A Walk in Test is to be held on **14.04.2021 & 15.04.2021** for filling up of 06 posts of CAD Operators in Central Design Bureau (CDB) in the Department of Health & Family Welfare on contract basis. The details are mentioned below:

Name of Post : CAD Operator
Total number of post : 06 (Six)

Minimum Qualification:

- (a) Certificate Course in Architecture/ Civil drawing from a recognised Institute.
- (b) Proficiency in Auto CAD (2D) drafting.

Desirable qualification:

- (i) Diploma in Architecture
 - (ii) Proficiency in Auto CAD, 3D views presentation
- (Candidates with higher qualification may be preferred subject to their suitability.)

Minimum Experience:

- (i) Three years experience of working in Architecture Office (copy of certificate to be enclosed)
- (ii) Good Knowledge of presentation drawing, submission drawings, working drawings, interior layouts etc.

Desirable Experience:

Worked on Hospital Projects.

Job Responsibilities:

- a) To assist in developing the design concept given by the officers.
- b) To prepare municipal drawings such as submission, completion, services drawings etc.
- c) To prepare presentation drawings, working drawings, detail drawings etc.
- d) To take measurement of site and preparing measured drawings etc.
- e) To make drawing of interior layouts.
- f) Any other work assign by their officers.

Age limit: Up to 40 years. However, retired Govt./Public Sector Officers up to the age of 65 years (as on the date of interview) who have already worked in Architectural setup,) may also be eligible to apply.

Tenure of contract: 1 year (period may be altered, subject to administrative exigencies.)

Emoluments: Rs. 25,000 per month (consolidated).

- The posts are solely for the CDB and the place of duty shall be New Delhi. The remuneration offered is consolidated and fixed, without any allowances.
- Candidates shall be required to submit the prescribed application form duly filled up with self- attested copies of certificates of qualifications, experience etc. All original documents and two passport size colour photograph and photo ID proof must be brought for verification at the time of test.
- Application form should be submitted at the time of turning up for walk in Test on the scheduled date and time.

Selection Procedure: The candidates will be selected on the basis of educational qualifications/merit and written test.

Reporting Date & Time:

Day-1: 14.04.2021- 10.00 A.M. to 11.00 A.M., at Reception Gate No. 5, Nirman Bhawan, Maulana Azad Road, New Delhi (Nearest Metro Station: Udyog Bhawan, for Document Verification).

Day-2: 15.04.2021- 10.00 A.M. to 11.00 A.M., at Reception Gate No. 5, Nirman Bhawan, Maulana Azad Road, New Delhi (Nearest Metro Station: Udyog Bhawan, for Walk in Test).

- **Candidates will not be entertained beyond 11.00 A.M.**
- **Any canvassing by or on behalf of the candidates or to bring political or other outside influence with regard to their selection/recruitment shall be considered as disqualification.**


(Amit Kumar)

Under Secretary to the Government of India
Tel. No. (011)23061323

Note: -1. The post requires fluent use of computers in word processing, worksheets for data compilation, basic analysis and presentations (PPP). The applicants should also have experience of using internet.

2. The applicants should be able to tour extensively for monitoring and supervision as & when required.

APPLICATION FORM

Post applied for: **CAD Operator (on contract basis)**

1. Name of the Applicant: (In capital letter) _____

2. Father/Husband's Name: _____

3. Mother's Name: _____

4. Date of Birth: _____

Self attested
colour photo

5. Age (as on 18.12.2015): _____ Years _____ Months _____ Days.

6. Gender (Male/Female):

7. Educational Qualifications:

Sl.No.	Academic/ Professional Qualification	Name of Institution	Board/ University	Course Duration / Year of passing out	Division/Grade/ Percentage

8. Desirable qualification:

Sl.No.	Academic/ Professional Qualification	Name of Institution	Board/ University	Course Duration / Yr. of passing out	Division/Grade/ Percentage

9. Experience:

Sl.No.	Designation	Name of Institution/Employer	From	To

(Reference with whom you have worked: Name : _____ Designation _____
and Contact No. _____)

10. Training/Short course attended (if any):

11. Award and /or Outstanding Achievements:

12. Contact Details:

a. Mailing Address: _____

b. Permanent Address: _____

c. Telephone Number: _____ (Mob.) _____

d. Email-ID: _____

13. Documents to be enclosed: Duly self-attested (Please Tick)

1. Degree/Diploma/Certificate ()

2. Experience Certificate ()

3. Age Proof ()

4. Any Other ()

UNDERTAKING:

I hereby certify that all the information given above is true and correct to the best of my knowledge. If any of the above information is found to be incorrect or concealed at a later stage, I shall be liable to be disqualified and termination from the assignment.

Signature of the Applicant

Date: _____

Place: _____