GOVERNMENT OF ANDHRA PRADESH

DIRECTORATE OF MEDICAL EDUCATION AND APVVP

RECRUITMENT PORTAL

* Important Steps to be followed.

- 1. Go through the instructions carefully before filling the online application.

- 2. Only online applications are accepted.

- 3. Hand written applications and any sort of communication is not accepted.

- 4. Once 'Submit' the Application it is final and the details cannot be edited.

- 5. In case of any help, please type your comment / representation / query in help form of Main menu once you login.

* Applicant Registration
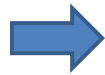
LOGIN INTO YOUR ACCOUNT

Userame

Password

Captcha

8 A aj TD

Refresh

LOGIN

Forgot Password?

For New Applicant Please Register Here.

GUIDELINES FOR ON-LINE APPLICATION.

For online Application Click on For New Applicant Register Here

REGISTRATION VERIFICATION

Userame Name

Password

Password (Confirm)

Mobile Number

Email

Email (Confirm)

Captcha

ote...

Activate Windows

O 6 11 G B J

➡️ Type your desired user name, password, email id and type Dynamic Image Letters (captcha) in the text box and click on REGISTER Button.

➡️ After entering valid OTP number only the registration process will be completed.

LOGIN INTO YOUR ACCOUNT

Userame

Password

Captcha

a W o j 7 K

Refresh

LOGIN

Forgot Password?

For New Applicant Please Register Here.

GUIDELINES FOR ON-LINE APPLICATION.

ctivate Windows

Login into Your Account with Registered Username, Password and type Dynamic Image Letters (captcha) in the text box and click on Login Button.

* Home Screen

➡ Click on personal details in the menu.

- **Personal Details form**
- **DME / APVVP – Direct Recruitment**

Select 'Post Applied' for speciality and fill Personal Details correctly and finally, click on **SAVE & NEXT**

- **Personal Details form**
- **DME – Lateral Entry**

➡ Select 'Post Applied' for speciality and fill Personal and lateral entry details correctly and finally, click on **SAVE & NEXT**

Refresh

🏛 **Post Details**

Medical Council Registration Number *

Date of Council Registration*

📅

Post Applied For *

DME - Lateral Entry ▾

Non-Clinical/Clinical/Super Specialty/Dental*

▾

💼 **In service candidates details for lateral entry (CAS/Tutor/Asst Professor)**

Employee ID*

Date of first appointment*

📅

Rank*

Year of Recruitment*

Present place of working*

▾

Designation*

✳ School Details

➡ Click on School Details in left menu.

Application ID, 89591

School Education Details

Please complete personal details form.

Refresh

- ♠ Home
- 👤 Personal Details
- 🔖 School Detials
- 🎓 Medical Education Detials
- 🗀 Contract Detials
- ☁ Upload Documents
- ⟨/⟩ Central Institutions Detials
- ⊘ Confiramtaion/Decalaration
- ❓ Help

Class	Name of the School	Place	Year of passing	State	District
IV	school name	place			
V	school name	place			
VI	school name	place			
VII	school name	place			
VIII	school name	place			
IX	school name	place			
X	school name	place			

Activate Windows
Go to Settings to activate Windows.

< PREVIOUS   SAVE & NEXT

➡ Fill up the study particulars from class IV to X and finally click on SAVE & NEXT. After submit details it was automatically redirects to next form.

* Medical Education Details

➡️ Click on Medical Education Details in left menu

🎓 Medical Education Details   🏠

Refresh

Qualification *	Speciality *	Name of the University/College *	Year Of Passing *	Marks Type *	Total Marks *	Weightage for Qualification (System Calculated)	Weightage for Seniority (System Calculated)	PG/Diploma/BDS/M.Sc Marks Memo as applicable *
MS ▼	cardio	Dr NTR University	January ▼ / 2015 ▼	Grade – A ▼	80	60	5	pdf file

File Name : AP_DIRECTORATE_MEDICAL_EDC1582799165847.pdf
File Status : Successfully uploaded file.

‹ PREVIOUS   SAVE & NEXT

Calculated 75% Weightage Qualification for DNB/ PG Degree/ Super Specialty Applicants.
Calculated 65% Weightage Qualification for Diploma Applicants.

➡️ Fill up the Medical Education Details and upload PG/Diploma/ BDS Marks Memo as applicable (pdf format file size below 10MB) finally , click on **SAVE & NEXT.**

➡️ For BDS candidates type BDS in Speciality text box.

✱ **Contract Details**

➡️ Click on Contract Details if you are working on Contract basis in the state of Andhra Pradesh Government Hospitals .

➡️ Fill up the Contract Details form and upload contract certificate from concerned Appointing Authority (pdf format).

➡️ If, the continuation of the contract service in another institution click on Add button and fill details finally Next button.

* Upload Documents.

➡ Upload Documents (Each file size below 4MB with required format).

S.No	Upload Documents	Select image/pdf File	Status	View
1	* Latest Passport Size Photo	UPLOAD .jpeg	Success	📄
2	* Signature	UPLOAD .jpeg	Success	📄
3	* SSC/ CBSC Certificate	UPLOAD .pdf	Success	📄
4	* Study(4th to 10th)/ Residence Certificate	UPLOAD .pdf	Success	📄
5	* PG Medical Council Registration Certificate / BDS / M.Sc Certificate as applicable	UPLOAD .pdf	Success	📄
6	* PG Provisional Degree / BDS / M.Sc Certificate as applicable	UPLOAD .pdf	Success	📄
7	* MBBS Degree Certificate/ BDS / M.Sc Certificate as applicable	UPLOAD .pdf	Success	📄
8	* Latest Integrated Caste Certificate	UPLOAD .pdf	Success	📄
9	* Disability Certificate - Medical Board Certified	UPLOAD .pdf	Success	📄
10	* Aadhar Card	UPLOAD .pdf	Success	📄
11	Inservice Candidate No Objection Certificate from Concerned Director of Health/ Commissioner APVVP / DME	UPLOAD .pdf	Success	📄
12	SR Completion Certificate (Clinical)	UPLOAD .pdf	Success	📄
13	Copy of Appointment order for in service candidate	UPLOAD .pdf		📄
14	Migration certificate those who are coming from the TS to AP	UPLOAD .pdf		📄
15	If person belongs to Ex-Service Man document pdf.	UPLOAD .pdf		📄

‹ PREVIOUS   SAVE & NEXT

Free pdf converts
pdf 995: create PDF documents easily for free
http://www.pdf995.com/download.html

❄ Central Institutions Study Details

➡ Click on Central Institution Study Details, if you are studying

➡ If, studied (who have completed PG/Super Speciality) in central institution, select the institution and upload the study certificate and click Next Button.

Before confirmation check the status of forms in the home page. Click on edit button to open the form details

Confirmation / Declaration

Click on **Confirmation/Declaration After Complete required form details.**

Confirmation/Declaration Form

Please complete (personal details, school details, medical education details, upload documents) forms.

Application ID, 89591

- Home
- Personal Details
- School Detials
- Medical Education Detials
- Contract Detials
- Upload Documents
- Central Institutions Detials
- Confiramtaion/Decalaration
- Help

download application | Refresh

GOVERNMENT OF ANDHRA PRADESH
DIRECTORATE OF MEDICAL EDUCATION

APPLICANT NAME :
APPLICATION ID :
APPLICATION CONFIRMATION DATE :

POST APPLIED FOR	MEDICAL COUNCIL REGISTRATION NUMBER	
MEDICAL COUNCIL REGISTRATION DATE	SB COLLECT REFERENCE NUMBER	
SPECIALITY/SUPER SPECIALITY	SURNAME	
NAME	FATHER NAME	
RELIGION	SOCIAL CATEGORY	
ARE YOU A PERSON WITH DISABILITY	IF YES CATEGORY	%
WHETHER BELONGS TO EX-SERVICE MAN CATEGORY	AADHAR NUMBER	
EMPOLYEE ID	DATE OF FIRST APPOINTMENT	
RANK	YEAR OF RECRUITMENT	

Online Payment – SB collect :

Application ID, 778997947665

- Home
- Personal Details
- School Detials
- Medical Education Detials
- Contract Detials
- Upload Documents
- Central Institutions Detials
- Confiramtaion/Decalaration
- Help

Payment Details

Online Payment Details

Please Note down the Application ID **778997947665** for payment purpose.

Please click here to open payment screen

After Payment Done

SB Collect Reference Number*

[ ] upload payment pdf

CLEAR   SUBMIT

---

* **Please note down the application ID with (Red colour.)**

* After opening the payment link: Enter application ID, applicant name, mobile number, Aadhar Number and select fee types.

* Enter fee amount manually.

* https://www.onlinesbi.com/sbicollect/icollecthome.htm?corpID=1824757

* After successful payment : Payment receipt (PDF file) should be uploaded and type the SB collect reference number and submit.

Online Payment – SB collect :

SBI

State Bank Collect

Products & Services   Know More   हिंदी

PAYMENT ONLINE

STATE BANK COLLECT

A MULTI-MODAL PAYMENT PORTAL

DISCLAIMER CLAUSE

Terms Used

> **Corporate Customer:** Firm/Company/Institution (F/C/I) collecting payment from their beneficiaries.

> **User:** The beneficiary making a payment to F/C/I for the services/goods availed.

> Bank shall not be responsible, in any way, for the quality or merchantability of any product/merchandise or any of the services related thereto, whatsoever, offered to the User by the Corporate Customer. Any disputes regarding the same or delivery of the Service or otherwise will be settled between Corporate Customer and the User and Bank shall not be a party to any such dispute. Any request for refund by the User on any grounds whatsoever should be taken up directly with the Corporate Customer and the Bank will not be concerned with such a request.

> Bank takes no responsibility in respect of the services provided and User shall not be entitled to make any claim against the Bank for deficiency in the services provided by the Corporate Customer.

> The User shall not publish, display, upload or transmit any information prohibited under Rule 3(2) of the Information Technology (Intermediaries guidelines) Rules, 2011.

> In case of non-compliance of the terms and conditions of usage by the User, the Bank has the right to immediately terminate the access or usage rights of the User to the computer resource of the Bank and remove the non-compliant information.

☑ I have read and accepted the terms and conditions stated above.
   (Click Check Box to proceed for payment.)

Proceed

Activate Windows

➡ Click on check box and Proceed to continue.

Online Payment – SB collect :

Choose Fees option in select payment category.

Online Payment – SB collect :

The above APDME Payment screen will be displayed in SB Collect.
Enter application ID, applicant name, mobile number, Aadhar Number and select fee types, Enter fee amount manually.

In continuation

Online Payment – SB collect :

Please enter your Name, Date of Birth **(For Personal Banking)** / Incorporation **(For Corporate Banking)** & Mobile Number.
This is required to reprint your e-receipt / remittance(PAP) form, if the need arises.

Name *

Date Of Birth / Incorporation *

Mobile Number *

Email Id

Enter the text as shown in the image *   **E6E6C**

Submit   **Reset**   **Back**

- Mandatory fields are marked with an asterisk (*)
- The payment structure document if available will contain detailed instructions about the online payment process.
- Date specified(if any) should be in the format of 'ddmmyyyy'. Eg., 02082008
- For Amount fields, only numbers are allowed and for free text fields (mandatory), following special characters are allowed: . / @ - _ &

Fill the above details for Bank purpose and submit button.

Online Payment – SB collect :

Check Particulars Click on confirm Button

Select Mode of Payment :

Net Banking

State Bank of India	Other Banks Internet Banking
Bank Charges: Rs 11.8	Bank Charges: Rs 17.7
Click Here	**Click Here**

Card Payments

This payment mode is not available between 23:30 hours IST and 00:30 hours IST

State Bank ATM-cum-Debit Card	Other Banks Debit Cards	Credit Cards
Bank Charges: Rs 0.0	Bank Charges: Rs 0.0	Bank Charges: Rs 12.98
Click Here	**Click Here**	**Click Here**

Prepaid Card	Foreign Card
Bank Charges: Rs 12.98	Bank Charges: --
Click Here	**Not Enabled**

Other Payments Modes

SBI Branch	NEFT/RTGS	UPI is not available between 22:30 hours IST and 23:30 hours IST
Bank Charges: Rs 59.0	Bank Charges: Rs 15.0	UPI
Click Here	**Click Here**	Bank Charges: Rs 0.0
		Click Here

If select Debit card fill the card details and Click on Pay Button
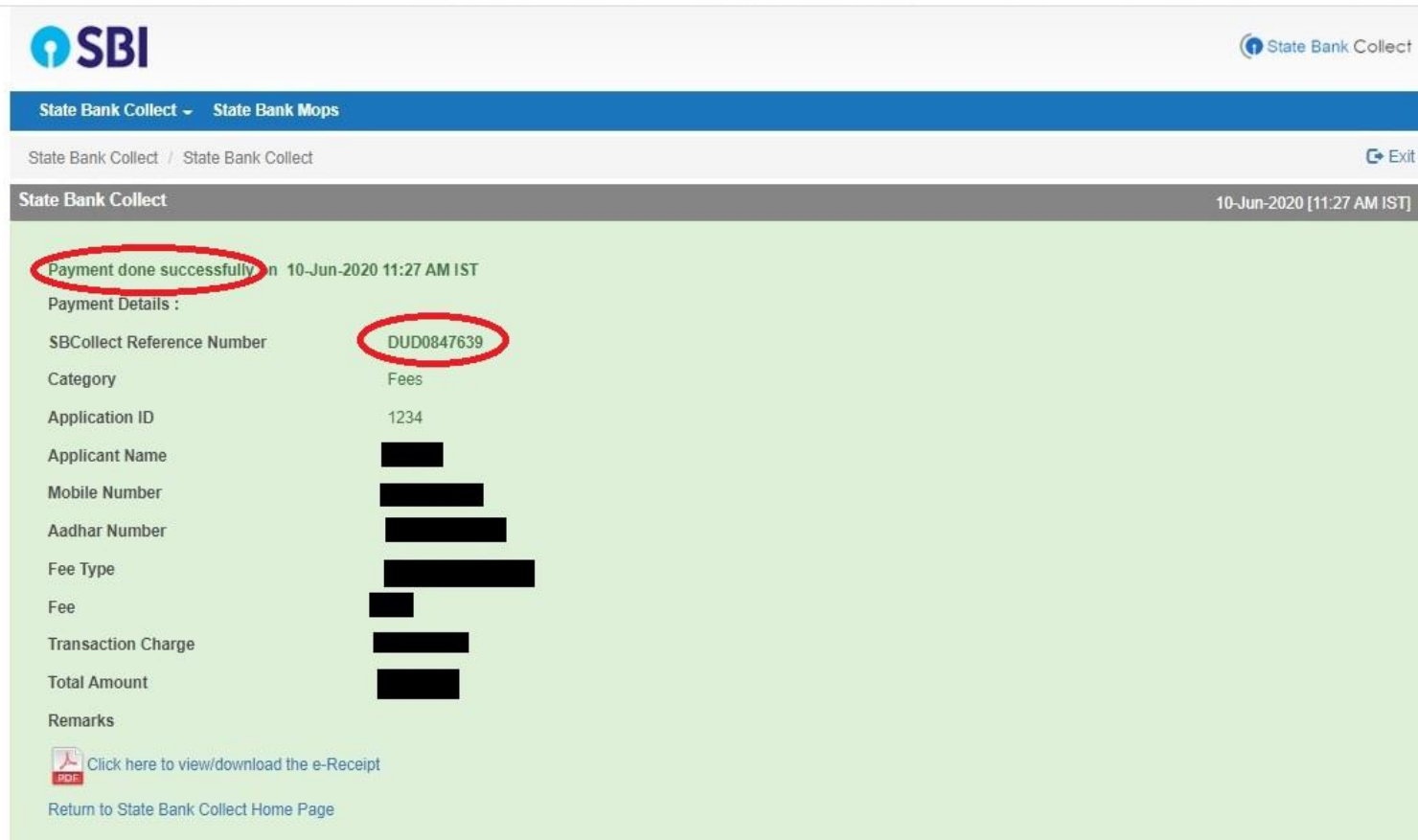
Note down the SB Collect Reference Number and Download the e-Receipt

SBI   State Bank Collect

State Bank Collect ▾   State Bank Mops

State Bank Collect / State Bank Collect   ↩ Exit

State Bank Collect   10-Jun-2020 [11:27 AM IST]

Payment done successfully on 10-Jun-2020 11:27 AM IST

Payment Details :

SBCollect Reference Number	DUD0847639
Category	Fees
Application ID	1234
Applicant Name	▮
Mobile Number	▮
Aadhar Number	▮
Fee Type	▮
Fee	▮
Transaction Charge	▮
Total Amount	▮
Remarks	

📄 Click here to view/download the e-Receipt

Return to State Bank Collect Home Page

Click on Print Button for Printing.
Convert PDf File (for uploading)

APDME
OLD GOVERNMENT HOSPTAL CAMPUSHANUMAN PET VIJAYAWADA, , VIJAYAWADA-520003
Date: 10-Jun-2020

e-Receipt for State Bank Collect Payment

SBCollect Reference Number	DUD0847639
Category	Fees
Application ID	1234
Applicant Name	▮
Mobile Number	▮
Aadhar Number	▮
Fee Type	▮
Fee	▮
Transaction charge	▮
Total Amount (In Figures)	▮
Total Amount (In Words)	▮
Remarks	
Notification 1	
Notification 2	

Print   Close

Online Payment :

➡ Type SB Collect Reference Number and Upload SB Collect Payment Receipt (Pdf format)

➡ Click on Submit Button.

➡ The above process completed your application is submitted successfully.