

# MINISTRY OF HEALTH AND WELLNESS

## Circular No. 17 of 2023

### *Vacancies for the post of Tradesman's Assistant in the field of welding*

Applications are invited from qualified employees on the permanent and pensionable establishment of the Ministry of Health and Wellness who wish to be considered for appointment as **Tradesman's Assistant** in the field of welding.

## **II. QUALIFICATIONS**

By selection from among employees on the permanent and pensionable establishment of the Ministry who:

- (a) possess the Certificate of Primary Education; and
- (b) have knowledge of the appropriate trade.

### **NOTE 1**

In the absence of candidates possessing the Certificate of Primary Education, consideration will be given to candidates who show proof of being literate.

### **NOTE 2**

Tradesman's Assistants will be required to pass the appropriate trade test to be eligible for appointment as Tradesman.

Candidates should produce written evidence of knowledge claimed.

## **III. DUTIES**

1. To work under the supervision of a Tradesman and to assist the latter.
2. To be familiar with the tools of the trade and to use them to perform operations, as appropriate, and under guidance so as to develop gradually the skills necessary for the trade.
3. To ensure that all tools, equipment and accessories used in the trade are kept in good working condition.
4. To perform such other duties directly related to the main duties listed above or related to the delivery of the output and results expected from the Tradesman's Assistant in the roles ascribed to them.

## **IV SALARY**

The permanent and pensionable post carries salary in the scale of Rs 13,975 x 250 – 15,225 x 260 – 17,825 x 275 – 18,925 x 300 – 19,525 x 325 – 21,475 x 375 – 22,225 x 400 – 22,625 a month plus salary compensation at the approved rates.

The selected candidates, will in the first instance, be appointed in a temporary capacity for a period of six months and will draw a flat salary of Rs 13,975 a month plus salary compensation at the approved rates. However, employees drawing higher salaries will retain the salaries of their substantive posts, where applicable. Consideration will, thereafter, be given for their appointment as **Tradesman's Assistant in the field of welding in a substantive capacity subject to: -**

- (a) **vacancies in the grade; and**
- (b) **their being favourably reported upon by their respective Head of Divisions / Sections.**

## V. MODE OF APPLICATION

- a. Qualified candidates should submit their application on prescribed forms which may be obtained **either** from the Hospital Executive Assistant's Office **or** the Human Resource (HR) Sections of the Regional Hospitals **or** the Human Resource Section (A) of the Ministry of Health and Wellness, Level 5, Emmanuel Anquetil Building, Port Louis, **or** from the website of the Ministry at **<https://health.govmu.org/health>**
- b. **Candidates should submit their application form in duplicate. The original to be sent directly to the Senior Chief Executive, Ministry of Health and Wellness and the duplicate through their respective Head of Divisions/Sections and Human Resource Section of their respective region.**
- c. Care should be taken to fill in the application form correctly. **Incomplete, inadequate or inaccurate filling of the application form may entail elimination of the applicant.**
- d. The originals of birth and qualification certificates should **not** be submitted with applications, but applicants should produce same as and when called upon to do so. **Applications not made on the prescribed form will not be considered.**

## VI. CLOSING DATE

Application Forms should reach the Senior Chief Executive (Attention Human Resource Section A), Ministry of Health and Wellness, 5<sup>th</sup> Floor, Emmanuel Anquetil Building, Port Louis not later than **3.30 p.m on Wednesday 13 December 2023. Applications received after the closing date will not be considered.**

- VII. When transmitting Applications Forms, Head of Divisions/Sections/Human Resource Section of the respective region should:-
- (a) verify all documents and evidence in respect of information given under any of the headings at Part I of the application forms; and
  - (b) complete **Part II** of the application form of each applicant of their respective Divisions/Sections and sign the last part of the application form certifying the correctness of the particulars recorded therein. The duplicate form should be submitted to the Human Resource Section within **one week** after the closing date.
  - (c) **The Human Resource Section of Regional Hospitals should verify the duplicate copy and complete Part III before submitting any application to the Senior Chief Executive (Attention Human Resource Section A), Ministry of Health and Wellness, 5<sup>th</sup> Floor, Emmanuel Anquetil Building, Port Louis within fifteen days after the closing date.**
- VIII. **Head of Sections/Divisions should ensure that the contents of this Circular are brought to the attention of all eligible employees including those on leave.**

Date: 23 November 2023

Ministry of Health and Wellness  
5<sup>th</sup> Floor Emmanuel Anquetil Building  
Port Louis

Copy to: Regional Health Services Administrators, JH, SSRNH, Dr BCH, JNH and VH  
Chief Hospital Administrator  
Hospital Administrator, All Hospitals  
Assistant Manager, Human Resources, JH, SSRNH, Dr BCH, JNH and VH  
File "Circular"

# MINISTRY OF HEALTH AND WELLNESS

## Part I

1. **Post applied for:** .....
2. **Date of advertisement:** .....
3. **Surname** (in block letters): .....
4. **Other names:** .....
5. **Maiden Name** (if applicable): .....
6. **Title:** Mr  Mrs  Miss  (Tick as appropriate)
7. **Date of Birth:** ..... 8. **Age:** .....
9. **National Identity No.:** .....
10. **Telephone No.:** Res: ..... Mobile: .....
11. **Residential Address** (in block letters): .....
12. **Place of work:** .....
13. **Date joined service:** ..... as .....
14. **Date transferred to PPE:** .....
15. **Present Job Title:** .....
16. **Date of Present Appointment:** .....
17. **Previous Appointment held in the Government Service and Capacity:**

<i>Appointment</i>	<i>From</i>	<i>To</i>	<i>Ministry/Department</i>

18. **Qualifications:**

(a) **Detailed Results**

<i>C.P.E/PSLC</i> <i>Year.....</i>		<i>School Certificate</i> <i>Year.....</i>		<i>GCE 'O' Level</i> <i>Year.....</i>	
<i>Subjects</i>	<i>Grade</i>	<i>Subjects</i>	<i>Grade</i>	<i>Subjects</i>	<i>Grade</i>

**Note:** Please attach copies of birth and educational certificates.

(b) Any other qualifications/experience: (e.g actingship):

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.....

19. (a) **Have you been the subject of an investigation/enquiry for any offence during the last 10 years?**

Answer Yes or No .....If Yes, indicate nature of offence and date of outcome.

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(b) **Have you ever been prosecuted before a court of law for any offence AND subsequently found guilty during the last 10 years?**

Answer Yes or No .....If Yes, give details (court, charge, date of judgement and sentence – e.g imprisonment, fine, caution or conditional discharge):-

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Date:.....

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*Signature of Applicant*

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**Part II**

**To be filled in by Head of Division/Section/Unit concerned**

(i) **Record of sick leave during the following years:**

2021: ..... 2022: ..... 2023 (as at date): .....

**Record of unauthorised absence during the following years:**

2021: ..... 2022: ..... 2023 (as at date): .....

(ii) **Report on applicant:**

Work: ..... Conduct: ..... Attendance: .....

(iii) **Comments, if any, on experience claimed and any other remarks:**

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.....

Date:.....

.....  
*Signature*

*Name (in full):* .....

*Designation:* .....

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**Part III**

**To be filled by an officer not below the rank of Human Resource Executive in the Human Resource Section of the Regional Hospitals where the applicant is posted**

(i) **Whether officer has been subject to disciplinary action for the past ten years. If in the affirmative, please give details:**

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(ii) **Whether the officer was / or is subject to police enquiry for any offence. If in the affirmative, please give details:**

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(iii) **Overall Score of Performance obtained according to the Performance Appraisal Form during the past 3 years:**

<i>Year</i>	<i>Rating</i>	<i>Year</i>	<i>Rating</i>	<i>Year</i>	<i>Rating</i>
2020/2021		2021/2022		2022/2023	

I certify that particulars under Parts I, II and III have been verified and found correct.

**Date:**.....

.....  
**Signature**

**Name (in full):** .....

**Designation:** .....

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