

List of RHCs for Medical Technician & Aya/Female Ward Servant Post		
S.No	Districts	Facility name
1	Abottabad	RHC Kalapani
2	Battagram	RHC Thakot
		RHC Kuzabanda
3	D.I.Khan	RHC Kirri Shamoza
		RHC Kot Jai
4	Hangu	RHC Naryab
5	Haripur	RHC Kalinger
6	Kohat	RHC Gumbat
		RHC Usterzai
7	Lakki Marwat	RHC Titter Khel
		RHC Gambila
8	Malakand	RHC Skhakot
9	Mansehra	RHC Shinkari
		RHC Lassan Nawab
10	Mardan	RHC Mangah
		RHC Shergarh
11	Peshawar	RHC Takhtabad
		RHC Putwar Bala
		RHC Regi
12	Shangla	RHC Karora
13	Swabi	RHC Sheikh Jana
		RHC Tordher
14	Swat	RHC Darmai
15	Tank	RHC Gul Iman
		RHC Amakhel

List of BHUs for Aya/Female Ward Servant Post

S.No	Districts	BHUs
1	Abottabad	BHU Kotyala
		BHU Nawasher
		BHU Nimble
2	Bannu	Labour Suite at Kalan Thughal Khel
		BHU Lalozaï
		BHU Bada Mera baz
3	Battagram	BHU Paemal sharif
		BHU Shingli Payan
		BHU Shemali
4	Buner	BHU Bagh
		BHU Gokand
5	Charsadda	BHU Akhundheri
		BHU Hissara Faqir Gul
6	Dir Upper	BHU Akkha Gram
7	Dir Lower	BHU Pingal
		BHU Osakai
8	D.I.Khan	BHU Zafarabad
		BHU Shor kot
		BHU Daraban khurd
9	Hangu	BHU Tough Sarai
10	Haripur	BHU Bagra
11	Kohat	BHU Togh Bala
		BHU Dhoadã
12	Lakki Marwat	BHU Ghazni Khel
		BHU Shabazkhel
13	Mansehra	BHU Sandesar
		BHU Bherkund
14	Malakand	BHU Haryan kot
		BHU Shingari
15	Mardan	BHU Jamra
		BHU Garhi Ismail Zai
16	Peshawar	BHU Terai Payan
		BHU Gulbela
		BHU Jagrha

		BHU Saeed Abad
17	Shangla	BHU choga
18	Swabi	BHU Jalbhai
		BHU Ismailia
		BHU Kala Butt
19	Swat	BHU Charbagh
		BHU Gullibagh

Program Management Unite
DGHS, Peshawar.

“Rehabilitation of all RHCs across KP and Conversion of 50 RHCs into 24/7 SBA facilities”.

Work / Job **Janitorial Services**

Name of Firm/Company: _____

Address: _____

Contact No: _____

Registration No of the Firm/Company with Govt. _____

FBR Registration No. Yes. _____ No. _____

KPRA Registration No. Yes. _____ No. _____

KPPRA Registration No. Yes. _____ No. _____

NTN No: _____

Sales Tax Registration No: _____

References

1. Name of client / Department (i) _____ (ii) _____ (iii) _____

2. Contact No of client / Department (i) _____ (ii) _____ (iii) _____

Tasks in hand

1. Name of client / Department (i) _____ (ii) _____ (iii) _____

2. Contact No of client / Department (i) _____ (ii) _____ (iii) _____

Certificate

A certificate to the effect that the firm / company is not black listed by any department / institution throughout Pakistan.

Dated: _____ / 03 / 2021.

Signature: _____

Name: _____

Designation: _____

Stamp: _____