

**OFFICE OF THE COMMISSIONER OF HEALTH & FAMILY WELFARE AND  
MISSION DIRECTOR, NATIONAL HEALTH MISSION: AP  
MANGALAGIRI, GUNTUR.**

Rc. No:1359/RCH-II/S1/ASHA/2011.

07-04-2025

Sub:CH&FW-NHM-CP/ASHA – Filling up of ASHA Worker vacancies in Rural, Tribal, and Urban areas across all 26 districts – Certain instructions Issued - Reg.

- Ref:
1. Guidelines for Community Process -2013, issued by the Government of India.
  2. Guidelines for ASHA and Mahila Aarogya Samiti in the urban context – 2014, issued by the Government of India'
  3. Rc.22/CH&FW/CP/2025, Dated 21-03-2025.
  4. ASHA Vacancy details received from all DM&HOs in the state.
  5. G.O.MS.No.113 Health Medical & Family Welfare (G2) Dept DT: - 21-08-2018.

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The attention of all the District Medical & Health Officers in the State is invited to the reference cited. They are informed that, as per the reference cited, this office has permitted the filling of ASHA Worker vacancies arises due to retirements in their respective districts. The sanctioned positions, current in-position ASHAs, and vacant ASHA positions are as follows:

Sanctioned Position - F.Y. 2025-26					TOT AL	In-Position March - 2025			TOT AL	Vacant Position			TOT AL
S. No	District	Rur al	Trib al	Urba n		Rura l	Trib al	Urba n		Rur al	Trib al	Urba n	
1	A S Rama Raju	0	3832	0	3832	0	3708	0	3708	0	124	0	124
2	Konaseema	1383	0	65	1448	1308	0	61	1369	75	0	4	79
3	Chittoor	1363	0	209	1572	1303	0	200	1503	60	0	9	69
4	Visakhapatnam	197	0	778	975	187	0	720	907	10	0	58	68
5	West Godavari	1200	0	195	1395	1172	0	158	1330	28	0	37	65
6	Palnadu	1114	189	237	1540	1067	184	226	1477	47	5	11	63
7	Prakasam	1569	159	310	2038	1518	153	304	1975	51	6	6	63
8	Anakapalli	1420	0	120	1540	1371	0	108	1479	49	0	12	61
9	NTR	915	0	400	1315	880	0	374	1254	35	0	26	61
10	Anantapur	1447	0	201	1648	1397	0	193	1590	50	0	8	58
11	Bapatla	1239	0	96	1335	1191	0	89	1280	48	0	7	55
12	Eluru	1428	278	155	1861	1378	274	154	1806	50	4	1	55
13	YSR Kadapa	1077	0	463	1540	1032	0	453	1485	45	0	10	55
14	Srikakulam	1424	663	147	2234	1389	655	141	2185	35	8	6	49
15	Kurnool	1415	0	274	1689	1382	0	261	1643	33	0	13	46

16	Sri Sathya Sai	1362	0	168	1530	1322	0	162	1484	40	0	6	46
17	Kakinada	1243	0	230	1473	1212	0	219	1431	31	0	11	42
18	Guntur	736	0	459	1195	713	0	445	1158	23	0	14	37
19	PP Manyam	1517	0	62	1579	1483	0	62	1545	34	0	0	34
20	Nandyal	980	342	289	1611	963	335	282	1580	17	7	7	31
21	East Godavari	1189	0	145	1334	1159	0	145	1304	30	0	0	30
22	Tirupati	1361	0	344	1705	1345	0	333	1678	16	0	11	27
23	Krishna	1214	0	216	1430	1197	0	207	1404	17	0	9	26
24	Annamayya	1124	0	124	1248	1107	0	122	1229	17	0	2	19
25	SPSR Nellore	1490	0	405	1895	1476	0	403	1879	14	0	2	16
26	Vizianagaram	1607	0	183	1790	1594	0	181	1775	13	0	2	15
<b>TOTAL</b>		<b>31014</b>	<b>5463</b>	<b>6275</b>	<b>42752</b>	<b>30146</b>	<b>5309</b>	<b>6003</b>	<b>41458</b>	<b>868</b>	<b>154</b>	<b>272</b>	<b>1294</b>

Accordingly, sanction is hereby accorded to the DM&HOs to recruit ASHAs as per the statement enclosed, duly following selection criteria here under:

**Selection Criteria & Process for Rural & Tribal Areas (Community Process Guidelines – 2013)**

- ASHA must be a woman resident of the village – preferably 'Married/Widow/Divorced/ Separated' and preferably in the age group of 25 to 45 years.
- ASHA should have effective communication skills, leadership qualities and be able to reach out to the community.
- She should be a literate woman with formal education minimum 10th Class.
- She should have family and social support to enable her to find the time to carry out her tasks.
- The educational and age criteria can be relaxed if no suitable woman with this qualification is available in the area.
- Adequate representation from disadvantaged population groups should be ensured to serve such groups better.
- The general norm for selecting ASHA in rural area will be "One ASHA for every 1000 (+ or – 10%) population.
- In tribal, hilly and desert areas, the norm can be relaxed to one ASHA per habitation, depending on the workload, geographic dispersion, and difficult terrain.
- The Village Health and Sanitation Committee (VHSNC) meeting should be conducted may nominate three eligible candidates for each vacancy in the particular village. Their names must be forwarded to the concerned PHC Medical Officer for further processing. The minutes of the meeting should

also be properly recorded.

- The PHC Medical Officer forwards all applications received from various villages to the District Health Society for the selection.
- The District Health Society must oversee the entire recruitment process and select one of the three (3) short listed names recommended by the VHSNC. To supervise this process at the district level, the society should appoint a District Nodal Officer from the regular cadre, who will be supported by the District Community Mobilizer.

#### **Selection Criteria & Process for Urban Areas (Guidelines for ASHAs and MAS in Urban Context – 2014)**

- ASHA must be a woman resident of the – “slum/vulnerable clusters” and belong to that particular vulnerable group which have been identified by District Health Society for selection of ASHA.
- She should be preferably ‘Married/Widow/Divorced/Separated’ and preferably in the age group of 25 to 45 years.
- ASHA should have effective communication skills with language fluency of the area/population she is expected to cover leadership qualities and be able to reach out to the community.
- She should be a literate woman with formal education of at least Tenth Class. If there are women with Class XII who are interested and willing they should be given preference.
- The educational and age criteria can be relaxed if no suitable woman with this qualification is available in the area and among that particular vulnerable group.
- She should have family and social support to enable her to find the time to carry out her tasks.
- Adequate representation from disadvantaged population groups should be ensured to serve such groups better.
- The general norm for selecting ASHA in urban area will be “One ASHA for every 2500 (+ or – 10%) population.
- The Urban Health and Sanitation Committee (UHSNC) meeting should be conducted may nominate three eligible candidates for each vacancy in the particular village. Their names must be forwarded to the concerned UPHC Medical Officer for further processing. The minutes of the meeting should also be properly recorded.
- The UPHC Medical Officer forwards all applications received from various wards in the urban context to the District Health Society for the selection.
- The District Health Society must oversee the entire recruitment process and



select one of the three (3) short listed names recommended by the UHSNC. To supervise this process at the district level, the society should appoint a District Nodal Officer from the regular cadre, who will be supported by the District Community Mobilizer.

Selection process will be done by the District Health Society (DHS) under the chairmanship of the District Collector and Magistrate.

This exercise should be in conducted in transparent manner (Calling applications from eligible candidates in the village secretariats and ward secretariats, displaying and communication the merit list to applicants, displaying the selection list, calling for objections if any and issue of final order, after redressing receiving objections if any)

The selection process may be completed by 15<sup>th</sup> June 2025 and details of the selected candidates to be submitted to the state office by 30<sup>th</sup> June 2025

G VEERAPANDIAN  
COMMISSIONER

To,  
All District Medical & Health Officers (DM&HOs) in this state.  
All District Immunization Officers (DIOs) in the state.  
All District Public Health Nursing Officers (DPHNOs) in this state.  
All District Community Mobilizer (DCMs) in this state.

Copy to,  
The State Nodal Officer –NUHM O/o CH&FW, Mangalagiri, Guntur.  
The State Programme Manager – NHM O/o CH&FW, Mangalagiri, Guntur.  
Copy to file.