Office of the Chief Medical Officer of Health & Secretary, District Health & Family welfare Samiti, Nandigram Health District Vill+PO+PS- Nandigram, Purba Medinipur, Pin-721631 Reg. No. S/M/2095 of 2015-16

Email: cmohnandigram@gmail.com

Ph: 03224-232207

Memo No: CM OH(N) 200/2104

Dated, Nandigram: 05 07/2022

RECRUITMENT NOTICE

Applications are invited from eligible candidates for following various posts of DH&FWS, Nandigram Health District on contract basis under 15 th. Finance Commission -Health Grant as per the Memo No. HFW/NHM-478/2021/370 Dated: 03.06.2022 of the Mission Director, NHM & Executive Director, WBSH&FW Samiti. Application would be accepted (by hand/Post/Currier) till 27.07.2022 (up to 5.00 PM) to the office of the undersigned (address given in letter head). Details are given in the table below. Eligible candidates may apply in the prescribed format attached herewith.

| of the nost | Block Epidemiologist | | | | |
|---|---|--|--|--|--|
| A) Name of the post Number of Post | 2(UR-1, SC-1) | | | | |
| Age Limit (as on 1 st January 2022) Place of posting Essential Qualification | Minimum 21 years and Maximum 40 Years Block Public Health Unit (BPHU) Bararankua RH, Erashal RH a) M.Sc. in Life Science/Epidemiology OR BAMS/BHMS/BUMS with MPH. b) Proficiency in advance MS Office. | | | | |
| Desirable Criteria Monthly Consolidated Remuneration | A) Ph. D/M.Phil. B) Experience in Public Health Rs. 35,000/- | | | | |

| | Block Public Health Manager |
|--|--|
| B) Name of the post | 2(UR-1, SC-1) |
| Number of Post | Minimum 21 years and Maximum 40 Years |
| Age Limit (as on 1 st January 2022) | Block Public Health Unit (BPHU) |
| Place of posting Essential Qualification | Bararankua RH, Erashal RH c) B.Sc. in Life Science with Post Graduate Degree/Diploma in Management d) Proficiency in advance MS Office. |
| Desirable Criteria | a) M.Sc. in Life Science b) Experience in Public Health Rs. 35,000/- |
| Monthly Consolidated Remuneration | |

am Health District

| | Laboratory Technician |
|------------------------------------|---|
| C) Name of the post | 4(UR-2, SC-1, ST-1) |
| Number of Post | Minimum 19 years and Maximum 40 Years |
| Age Limit (as on 1st January 2022) | Block Public Health Unit (BPHU) |
| Place of posting | Parametria RH Frashal RH |
| Essential Qualification | i) Passed Class 12 with Physics, Chemistry & Mathematics/Biology Science. ii)Diploma in Medical Laboratory Technology from any Institution recognised by the Govt. of WB (State Medical Faculty) or Diploma in Laboratory Techniques (DLT) from School of |
| Desirable Criteria | Tropical Medicine. 2 years post qualification experience in any Laboratory of Government Institutions or Private Institutions licensed under Clinical Establishment Act. |
| Monthly Consolidated Remuneration | Rs. 22,000/- |
| Monthly Consolidated Remains | |

| | Block Data Manager | | | | |
|------------------------------------|--|--|--|--|--|
| D) Name of the post | 2(UR-1, SC-1) | | | | |
| Number of Post | Minimum 21 years and Maximum 40 Years | | | | |
| Age Limit (as on 1st January 2022) | Block Public Health Unit (BPHU) | | | | |
| Place of posting | Bararankua RH, Erashal RH | | | | |
| Essential Qualification | 1) Graduate from any recognized university and have complete at least 1 year Diploma course in Computer Application from Govt. registered Institution. 2) Working Knowledge of computers with operating knowledge of MS Word, MS Excel, MS Power Point, MS Access and Internet. 3) Minimum 3 years' experience in Government Sector or 5 years' experience in Private Sector in data recording and analysis. Rs. 22,000/- | | | | |
| Monthly Consolidated Remuneration | NS. 22,000/ | | | | |
| Monthly Consolidated Wes | | | | | |

Note: -

- 1) Essential qualification degree through Distance Learning Course or from any Open University will not be entertained.
- 2) Candidates will be called for Computer Test and Interview on the basis of score of essential and desirable criteria (wherever applicable).
- 3) Candidates qualified in Computer test will be called for interview (wherever applicable).
- 4) Selection will be made on the basis of marks obtained in academic qualification, experience, computer test (wherever applicable) and interview (wherever applicable)
- 5) 1:5 candidates will be called for Computer test and Interview.

Chief Medical Officer of Health Nandigram Health District

| E) Name of the post | Medical Officer | | | | | |
|------------------------------------|---------------------------------------|--|--|--|--|--|
| Number of Post | 5(UR-3, ST-1, SC-1) | | | | | |
| Age Limit (as on 1st January 2022) | Upper age limit 62 years | | | | | |
| Place of posting | Any U-HWC(Contai Municipality) | | | | | |
| Essential Qualification | MBBS from any Medical College | | | | | |
| Monthly Consolidated Remuneration | Rs. 60,000/- | | | | | |
| Scale of Scoring | As per 100% Merit (Final Examination) | | | | | |

| F) Name of the post | Staff Nurse |
|--|---|
| Number of Post | 5(UR-3, ST-1, SC-1) |
| Age Limit (as on 1 st January 2022) | Minimum 19 years to Maximum 40 Years |
| Place of posting | Any U-HWC (Contai Municipality) |
| Essential Qualification | a) Complete GNM training course from an Institute recognized by the Indian Nursing Council/West Bengal Nursing Council or complete B.Sc. Nursing course. b) Must be registered under West Bengal Nursing Council. |
| Monthly Consolidated Remuneration | Rs. 25,000/- |
| Short listing method | 1:5 candidates will be called for Document Verification. |

Chief Medical Officer of Health Nandigram Health District

| G) Name of the post | ANM (Community Health Assistant-Urban) |
|--|---|
| Number of Post | 5(UR-3, ST-1, SC-1) |
| Name of the second of the seco | A Mavimum 40 Vaars |
| Age Limit (as on 1st January 2022) | Minimum 21 years to Maximum 40 Years |
| Place of posting | Any U-HWC(Contai Municipality) |
| Essential Qualification | Must have passed ANM course from an institute recognised by the Indian Nursing Council & be registered with the W.B. Nursing Council. Should be proficient in Bengali & permanent resident of the Nandigram HD. OR |
| | Must have passed GNM course from an Institute recognized by the Indian Nursing Council & be registered with the W.B. Nursing Council. Should be proficient in Bengali & permanent resident of the Nandigram HD, |
| | No additional marks will be allotted for GNM passed candidates. |
| Monthly Consolidated Remuneration | Rs. 13,000/- |
| General Information | Following documents (self-attested) needs to be submitted along with the attached application format. 1) Photo proof identity card (Passport or Voter ID Card or AADHAAR Card or Pan Card). 2) Proof regarding permanent residential status of the district applied for, which should be duly attested by a Gazette Officer or Group — "A" Officer of the State Government (Voter ID Card/Ration Card). 3) The age proof certificate like admit card/School leaving certificate issued by West Bengal Board of Secondary Education or similar board. 4) Caste Category Certificate (if any). In case of OBC candidate's category' A' or 'B' must be montioned specifically in the caste certificate otherwise the candidate will be treated in "Unreserved" category. 5) Marksheets and passed certificate of Madhyamik and ANM/GNM examination. 6) Self attested copy of the ANM/GNM Registration Certificate. |
| Selection Committee | The approved District Level Selection Committee as applicable for all District level recruitment. |

General Instruction to the Candidates

Documents required at the time of physical verification:

 Fined up Application.
 Self-Attested Photo copy of Admit card of Madhyamik or equivalent.
 Self-Attested Photo copies of Mark Sheets — Madhyamik & Higher Secondary. 4. Self-Attested Photo copies of All Mark sheets (Semester /Year wise) of Bachelor Degree, Master Degree and Management degree (as per post criteria)

Self-Attested Photo copy of Caste certificate (to whom applicable)

6. Self-Attested Photo copy of Diploma/Degree in Medical Laboratory Technology (DMLT) recognized by the Govt. of West Bengal State Medical Faculty / AICTE

7. Self-Attested Photo copy of Computer Course Certificate as per post criteria

8. Self-Attested Photo copy of Experience Certificate (Experience certificates must consist of Name of the post, Employer's Name, Employee's Name, Date of Joining (DOJ) and Date of Leaving (DOL) otherwise experience certificates will be treated as invalid).

9. Self-Attested Photo copy of Voter card / Aadhar card / other address proof.

Important Information for the candidate:

 No. of Posts may be changed in future
 Age relaxation for SC /ST /OBC candidates as per Govt. norms.
 One candidate may apply for multiple posts if he/ she are eligible.
 Multiple application by one candidate for single post is liable to cancelation of candidature

5. The selection committee reserves the right to reject any application without any notice which is /are not properly filled up and also to cancel the recruitment process partially or fully without assigning reason thereof. Decision of selection committee is final.

6. Failure to submit any requisite documents liable to cancellation of candidature

at the time of physical verification.

- 7. No TA/DA will be paid to the candidates for the selection test/Interview
- 8. Any omission/suppression of information shall lead to rejection of application or candidature at any stage of the process without further intimation. The conditions so prescribed shall not be relaxed.

9. Candidates are instructed to send/submit (postal/ courier/ by hand) hard copy of application form & other relevant documents at this end.

06.07.2022

10. Commencement of submission of application is 27.07.2022 up to 5:00 PM 11. Closing date of submission of application

12. Exact date, time & venue for examination / interview will be intimated to the eligible candidates in due course as well as such information will also be www.wbhealth.gov.in website the available in purbamedinipur.gov.in

> CMOH & Secretary, DH & FW Samity Nandigram HD

Memo No: CMOH(Nagm)/2104/1(14)

Dated. Nandigram; 05/07/2022

Copy forwarded for information;

- 1. The Hon'ble Chairman of District Level Selection Committee, Nandigram HD
- 2. The Mission Director-NHM, West Bengal, Swasthya Bhawan, Kolkata-91
- 3. The Director of Health Services, West Bengal, Swasthya Bhawan, Kolkata-91
- 4. The Additional Mission Director, NHM, West Bengal, Swasthya Bhawan, Kolkata-91
- 5. The District Magistrate, Purba Medinipur.
- 6. The Addl. District Magistrate (Health), Purba Medinipur.
- 7. The Programme Officer-I,NHM, West Bengal, Swasthya Bhawan, Kolkata-91
- 8. The Dy.CMOH-I, II,III,DTO,DPHNO, Nandigram HD.
- 9. The OC (Health), Nandigram HD
- 10. The DIO, NIC, Purba Medinipur with request to publish the advertisement in the official website of "office of the District Magistrate, Purba Medinipur"
- 11. HR Cell, Swasthya Bhawan, Kolkata-91
- 12 . The System Coordinator, IT Cell, Health & Family Welfare Department, Swasthya Bhawan, Kolkata-91 with request to publish the advertisement in the website - www.wbhealth.gov.in
- 13. The DPC, DAM, DSM -NHM, Nandigram HD

14. Office Copy

I & Secretary, DH & FW Samity, Nandigram HD

APPLICATION FORMAT

| | APPLICATION | FOR TH | E POST OF_ | | | | |
|------------|--|-----------------|-------------------|----------------------|----------------|----------------|--------------|
| 1. Na | me (In Block Letter) | | : | | | | Paste recen |
| 2. Fat | ther's/Husband's Name | | : | | | | Passport siz |
| 3. Da | te of Birth (DD/MM/YYY | Y) - | : | | | | photograph d |
| 4. Sex | X | | : | | | | signed acros |
| | rital Status | | • | | | | |
| | ste/Category (Put Tick Ma | rk) | : GEN S | SC | ST | OBC-A | ОВС-В |
| o. Ca. | sic/Category (1 at 11ck Wa | ik) | . GEN | | 51 | OBC-A | рвс-в |
| | | | РН | | | | |
| 7. Ad | | | : | | | | |
| | bile Number | | : | | | | |
| | nail ID | | : | | | | |
| | alification details | _ | : | | | | |
| Sl. No. | Qualification | Year of Passing | | niversity | Total Marks | Marks obtained | Percent age |
| | Madhyamik/Equivalent* | 8 | | | 1120111 | ostanea | uge |
| 2. | HS/Equivalent* | | | 1907-2007 | | | |
| 3. | Graduation/Equivalent* | | | | | | |
| | - | | | | | | |
| 4. | PG/Equivalent | | | | | | |
| 5. | Others(give details) | | | | | | |
| only fo | Isory languages and best three r Honours Subjects. mputer Knowledge (if any) deta | | bjects. For honou | <u>irs graduates</u> | s calculate t | otal marks & m | arks obtain |
| SI. | Name of Institution | | Year of | Course D | uration | Course Name | |
| No. | | | Passing | | | Cove | ered |
| 1. | | | | | | | |
| 2. | | | | | , | | |
| 3. | | | 2 | - | 4 | | |
| 2. Exp | erience Details:- | | | | | | |
| Sl. No | Details of employer (Organ | ization | Joining Date | Working | | | on & JOB |
| • | Name & Address) | | | Complet | e Years) | Descri | iption) |
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| I do h | nereby declare that particul | lars furnis | shed above are | all correct. | | | |
| lace: | | | | | Signat | ture of the Ca | ndidate |
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| ate: | | | | | | | |

APPLICATION FORMAT FOR THE POST OF COMMINITY HEALTH ASSISTANT (URBAN) (FEMALE ONLY)

[N.B. Application forms not properly filled in or incomplete Application forms are liable to be cancelled.] 1. Name in full (in Capital letters): Space for pasting recent passport size photograph duly signed by the candidate. 2. Guardian's Name: 3. (a) Date of Birth according to Madhyamik or equivalent examination certificate (b) Age as on 1.1.2022 4. (a)(i) Caste category (UR/SC/ST/OBC-A/OBC-B) OF WB:..... (ii) Designation of issuing authority of the Caste Certificate (If any) . (b) Physically handicapped (Yes/No) 5. Corresponding address (in Capital letters) to which : communication should be sent (mentioning post office, Sub-division, District, Pin Code) 6. Permanent address (in Capital letters) 7. Contact No. : 8. E-mail ID 9. Whether citizen of India (Yes & No)

(By Birth/Registration)

10. Educational Qualifications: Class 10 onwards

| Name of the Exam. Passed | Name of the board/University/ Institute | Full Marks | Marks Obtained | % Of Marks | Division /Grade | Chances taken to Pass | Year of passing |
|-----------------------------|---|---------------|-------------------|---------------|--------------------|-----------------------------|-----------------|
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11. Professional / Others Qualifications or Specifications:

| Name of the exam. passed | Name of the Board/University/Institute | Registration Number | Full Marks | Marks Obtained | % Of Marks | Year of Passing |
|--------------------------|---|------------------------|---------------|-------------------|---------------|--------------------|
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DECLARATION

I do hereby declare that all the statements given above by me are true and correct in all respect. If any statement found false at the time of examination/ interview or after my appointment then my candidature will liable to be cancelled or my service will terminate automatically.

| | 7. | | Signature of | the candidate |
|--------|----|--|--------------|---------------|
| | | | | |
| Place: | | | | |
| Date: | | | | |