

Government of West Bengal
Office of the Chief Medical Officer of Health
District Health & Family Welfare Samity
Asansol HD (Paschim Bardhaman)

E-mail ID: cmoh.asnsl@gmail.com

Ph.No.8597042976

Memo No.: DH&FWS/ 1186

Dated Paschim Bardhaman, the 10/1/19

RECRUITMENT NOTICE-2019

Applications in prescribed format are invited from eligible candidates for engagement of different posts as given below on contractual basis under CMOH, Paschim Bardhaman (Erst while Asansol Health District)

Details of vacancy as given below:-

Sl. No.	Name of the post	No. of Vacancy	Reservation Status	Remuneration/ month (Rs.)
1.	Staff Nurse (NRC)	01 (one)	SC	11,400/-
2.	Medical officer, AH	01 (one)	UR	40,000/-

Eligibility criteria :-

1. Staff Nurse (NRC)

Essential Qualifications:

- a) GNM from an institute recognized by the Indian Nursing Council
- b) Must know bengali

Age Limit: Up to 40 Years (As on Advt. Date) (Relaxation as per Government norms)

2. Medical Officer, AH

Essential Qualifications:

- a) MBBS degree from WBMC / IMC

Desirable Qualifications:

- a) Preference will be given for Post Graduate / Degree in G& O or Paediatrics and similar experience

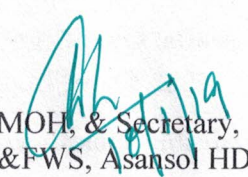
Age Limit: Up to 45 Years (As on Advt. Date) (Relaxation as per Government norms)

N.B.

- (i) Applicants applying for the post should have the requisite qualification and experience as on last date of application.
- (iii) Applicants should preferably be the resident of this district.

General Instructions:

1. The initial contract period will be up to 31/03/2020 and it may be renewed for further period depending upon the performance of the candidates.
2. Desiring candidates may send their applications in the attached prescribed format only along-with attested (self) photocopies of all testimonials including proof of age, mark sheets & certificates of all examinations passed (Educational), working experience certificates on the related fields, voter ID card / AADHAR card for proof of residence, SC certificate from competent **authority** and one passport size photograph duly signed by the candidate under **Registered Post/ Courier to the Office of the Chief Medical Officer of Health, Kalyanpur, beside CWC Office, Asansol-713305 within 28/01/2019 within 05:00 p.m.** positively.
3. The category of post should be superscripted in the Capital letters on the top of the left side of the envelope. Without superscription will be treated as cancelled.
4. Incomplete applications in any respect are liable to be rejected. No representation against such rejection shall be entertained.
5. For eligibility criteria, application form and other details please visit the website www.wbhealth.gov.in and www.bardhaman.nic.in or notice board at the office of the undersigned.
6. The recruitment committee reserves the right to cancel the candidature of any applicant or entire engagement process without assigning any reason.
7. Appointment/Joining letter will not be treated as Experience Certificate.
8. Candidates have to follow www.wbhealth.gov.in and www.bardhaman.nic.in for any further information related to respective recruitment.
9. Any eligible candidate willing to apply for more than one post will have to submit separate application.
10. A panel will be prepared for posting in future vacancy if any within next one year.


CMOH, & Secretary,
DH&FWS, Asansol HD
Paschim Bardhaman

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APPLICATION FORM

To
 The CMOH, & Secretary,
 DH&FWS, Asansol HD
 Kalyanpur Satellite Township
 Beside CWC Office, Asansol
 Paschim Bardhaman



(To be filled in by the candidate in BLOCK LETTER)

1. Post Applied for:

2. Name of the Candidate:

3. Father's/Guardian's Name:

4. Date of birth:/...../.....(DD/MM/YYYY)

5. Age as on (date of Advertisement):.....

6. Caste & Categories: General/SC/ST/OBC-A/OBC-B/PH (please tick)

7. Address for communication:

Permanent Address:

.....

.....

.....

.....

P.O.:

P.O.:

P.S.:

P.S.:

PIN:

PIN:

District:

District:

8. Contact Number:.....

9. Driving license No. (if applicable):.....

10. E-mail ID:.....

11. Academic Qualification:

Sl. No.	Exam passed	Board/ Institution/ University	Year of Passing	Marks Obtained	Total Marks	% of Marks
1						
2						
3						
4						
5						
6						

12. Professional/Technical/Computer knowledge:

Sl. No.	Course Name	Institute Name	Affiliated By	Course Duration	Passing Year	Course Contains	% of Marks /Grade

13. Experience in Govt. Sector/Private Organization (must have appointment letter and experience certificate):

Designation	Name of the organization	Govt./ Private	duration		Total experience
			From	To	

Declaration:-

I hereby solemnly declare that the information furnished above are based on material records and are true to the best of my knowledge and believe. If any information furnished or any part of it's found to be incorrect than I understand that my candidature is liable to be cancelled without any further information to me.

Date:-

Place:-

(Full signature of the Applicant)