



DEPARTMENT OF HEALTH & FAMILY WELFARE  
OFFICE OF THE CHIEF MEDICAL OFFICER OF HEALTH  
ASANSOL, KALYANPURSATELITE TOWN, PO: R K MISSION, PIN-713305  
PASCHIM BARDHAMAN

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Ph. No- 0341 3510048

Memo No. DH&FWS/ASL/22-23/ 250

Dated: 08.06.2022

**(NOTIFICATION)**

In reference to the order of Executive Director, WBSH & FWS vide Memo No: HPH/9M-06-2018/1745 Dated 30.09.2020 for the engagement of Peer Support for NVHCP under NHM and subsequent recruitment Notification No DH&FWS/ASL/20-21/728 dated 11.11.2020, the following has been Selected for Contractual engagement in the Post of **Peer Support** at District Hospital Asansol.

Sl. no.	Name of the Candidate	Father's/ Guardian's Name	Place of posting
1	Mr. Shantanu Kumar	Mr. Mukul Kumar	District Hospital Asansol

- 1) The selected candidates may be engaged on contractual basis in the existing vacant District Hospital Asansol.
- 2) Candidates may be requested to join within **22.06.2022**, failing which the candidature may be treated as **cancelled**.
- 3) Candidates are requested to bring one non-judicial stamp paper worth Rs. 50/- or more, any Govt. issued photo identity proof and the medical fitness certificate as annexed.
- 4) The period of contractual engagement will automatically be terminated on **31.03.2023**, which may further be extended on satisfactory performance.
- 5) Increment in the remuneration will prevail as per the memorandum/order already in force by the SH&FWS.
- 6) The contract also be terminated in one Month's notice from either side.
- 7) The monthly consolidated remuneration is Rs. 10,000/- (Rupees Ten Thousand only) from NVHCP fund.
- 8) He will draw his salary from the date of joining at District Hospital Asansol.
- 9) This is being issued in the interest of Public Services.

*Sumit*  
08/06/22  
Secretary, DH&FWS &  
Chief Medical Officer of Health  
Paschim Bardhaman  
Dated: 08.06.2022

Memo No. DH&FWS/ASL/22-23/250/1(12)  
Copy forwarded to :

1. The Mission Director, NHM, Swasthya Bhavan, Kolkata-91
2. The Director of Health Services, Govt. of West Bengal, Kolkata
3. The District Magistrate, Paschim Bardhaman,
4. The State Programme Officer, NVHCP, Health & Family Welfare Dept. Govt. of WB
5. The Dy. CMOH-I/II/III, Paschim Bardhaman,
6. The Superintendent, District Hospital Asansol,
7. The Accounts Officer, DH&FWS, Paschim Bardhaman
8. The HR Manager, NHM, Swasthya Bhawan, Kolkata
9. The DPM, DH&FWS, Paschim Bardhaman
10. IT Cell , Swasthya Bhavan, Kolkata-91- with the request to publish this notification in the official web page
11. The Shantanu Kumar, Peer Support, for compliance
12. Office Copy

*Sumit*  
08/06/22  
Secretary, DH&FWS &  
Chief Medical Officer of Health  
Paschim Bardhaman

**Medical Certificate in case of appointment of candidates under  
West Bengal State Health & Family Welfare Samiti**

Name of the candidate in full (in block letters) :  
Height (without shoe) : Cm.  
Weight : Kg.

"I hereby certify that I have examined Sri/Smt..... a candidate for employment in the West Bengal State Health & Family Welfare Samiti, and can't discover that Sri/Smt..... has any disease, (communicable or otherwise) constitutional weakness or bodily infirmity, except.....

I do not consider this a disqualification for employment in the office of State Samiti. Sr/Smt.....'s age is, according to his own statement..... Years, and by appearance about.....years".

- a. General Development : Good/Fair/Average/Poor
- b. Vision : Right eye: Left eye:  
i. Uncorrected/Naked eye :  
ii. Corrected :  
iii. Nature and degree :
- c. Teeth : d. Hearing : e. Blood pressure :  
f. Lung : g. Heart : h. Liver :  
i. Spleen :  
j. Hernia (present or absent) :  
k. Hydroceles (present or absent) :  
l. Urine i. Specific Gravity ii. Albumin iii. Sugar  
m. Identification marks :  
n. The Candidate is :

i. Fit

ii. Unfit on account of

iii. Temporarily unfit on account of

Dated:

Signature of the Medical Practitioner

Name :

Degree :

Regn. No. :  
(Seal)

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Signature of Candidate

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Attested