



Government of West Bengal
Office of the Chief Medical Officer of Health, Malda
P. O. Jhaljhalia (J. R. C.), District – Malda, Pin-732102
E-mail: cmohmalda.estb@gmail.com & cmohmld.dpmu@gmail.com

Memo No: DH & FWS/ 658

Dated: 14/03/2023

ORDER

In reference to the recruitment notice memo no.DH&FWS/1471 dt.06.07.2022, the following candidates are hereby engaged from waiting list on contract basis for the position of **Community Health Assistant, U-HWC, ULB under XV-Finance Commission –Health Grant**. She will get a consolidated monthly remuneration of Rs.13,000.00 (Rupees Thirteen Thousand only) from concerned activity head of XV-Finance Commission –Health Grant . She will be posted in places as mentioned against their respective names in the Column “Place of Posting”

SL No.	Regn. No.	Name of the Candidate	S/D/W of	Address of the Candidate with PIN	Caste	DOB	Place of Posting
3	CHA/05	SUDESHNA CHOWDHURY	BABULAL CHOWDHURY	BAPUJI COLONY, KRISHNA PALLY, PS-ENGLISH BAZAR, PO-MALDA, MALDA-732101	SC	15/12/1999	U-HWC, Balia Nawabab Ganj, Ward No.01, Old Malda Municipality, Malda

The candidate is hereby engaged as per the terms and conditions mention below:

1. The engagement is subject to the final outcome of the petition filed WPA (P) 335 of 2022 Pijus Patra Vs. The State of West Bengal
2. The engagement is made purely on contract basis till 2025-2026 i.e.it will be co-terminus with the tenure of XV-Finance Commission Health Grant.
3. However, the contract period will be renewed every year based on satisfactorily performance of the Candidate.
4. There will be no enhancement of remuneration during the tenure of his /her contract period.
5. No transfer request will be entertained during the engagement period.
6. This engagement will take effect from the date he/she joins the position.
7. The service may also be terminated by one month's notice from either side.
8. If the incumbent proposes to give up his/her work without covering 1 (one) month's notice period, his/her remuneration will be deducted accordingly.
9. The Candidate has to produce a Medical Fitness Certificate from the registered Medical Practitioner (holding MBBS degree) in the enclosed format and a valid photo identity proof of himself/herself at the time of joining the position.
10. He/She is hereby directed to report for joining in the designated position to the undersigned.
11. **The order of engagement will stand cancelled if the candidate fails to join within 20/03/2023 from the date of issuance of this order.**

Dr. Roy 14/3/23
Chief Medical Officer of Health, Malda
& Secretary, District Health & Family Welfare Samity
Dated: 14/03/2023

Memo No: DH & FWS/ 658/1(20)

Copy forwarded for information and necessary action to:-

1. The Chairman, Recruitment Committee, Malda
2. The Mission Director, NHM, Swastha Bhawan, Kolkata.
3. The Addi. Mission Director, NHM, Swastha Bhawan, Kolkata
4. The District Magistrate, Malda
5. The Principal MMC&H, Malda.
6. The Chairman, English Bazar Municipality & Old Malda Municipality, Malda with request to display in the notice board.
7. The Addl. District Magistrate (G), Malda
8. The MSVP, Malda MMC&H, Malda with request to display in the notice board.
9. The Programme Officer-I, NHM, Swastha Bhawan, Kolkata.
10. The SNO, NUHM, Health & Family Welfare, Swastha Bhawan, Kolkata.
11. The OC, Health Malda
12. The Dy. CMOH-I, II, III, IV, DMCHO, DTO, DPHNO, Malda
13. The ACOH (Sadar / Chanchal), Malda
14. The Accounts Officer, CMOH office, Malda
15. The State HR Cell, “Swasthya Sathi” Building, Swastha Bhawan, Kolkata.
16. **The District Informatics Officer (NIC), Malda, District Collectorate Building, Malda with request to publish the recruitment notice in www.malda.gov.in**
17. **The System Co-ordinator, IT Cell, Swasthya Bhawan, Kolkata with request to publish the recruitment notice in www.wbhealth.gov.in**
18. The HC, CMOH Office Malda.
19. The DPM, DAM, AM, DSM, DPMU, Malda.
20. Guard File

Dr. Roy 14/3/23
Chief Medical Officer of Health, Malda
& Secretary, District Health & Family Welfare Samity

**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. Sri/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 :

