

# WEST BENGAL STATE HEALTH & FAMILY WELFARE SAMITI

Registration NO :S/IL/14448 of 2002-2003

Swasthya Bhawan, 'B' Wing, 3rd Floor, GN-29, Sector-V, Salt Lake, Kolkata-700091

Tele Fax No:033-2357 7901/3636,e-mail-ed\_samity@wbhealth.gov.in

No: HPH/NPPCD/12/2014/ 8506

Date: 01/09/2017

## ORDER

In reference to the recruitment notice no SHFWS/2017/101 dated 20.02.2017, the following candidates are hereby engaged for the position of **Audiometric Assistant under NPPCD** on contract basis with a consolidated monthly remuneration of **Rs. 15,000/-** (Rupees Fifteen Thousand) only and posted in the district / health district as shown against their respective names in the column no. 6 until further order.

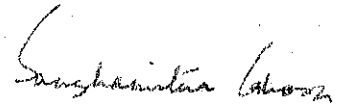
Sl No	Reg ID	Name of the Candidate	Caste	Address	Place of Posting
1	74628	MR. PRAVIN KUMAR	UR	55 KARJAN, ATHMALGOLA, PATNA, BIHAR, PIN-803211	ASANSOL HD
2	74456	MR. PRATAP KUMAR DOLUI	UR	DR. C. C. C. ROAD, KRISHNAPATTY, TELINIPARA, BHADRESWAR, HOOGHLY, WEST BENGAL, PIN-712125.	HOOGHLY
3	74344	MR. NIRMALYA SARKAR	UR	KHADIMPUR RABINDRANAGAR BALURGHAT WEST BENGAL 733101	MALDA
4	74364	MR. BUDDHADEV NATH	UR	TAPATI BHAWAN, ATUHAT PARA, KATWA, WEST BENGAL, PIN-713130.	HOWRAH
5	74536	MR. SUBHASHIS SIDDHA	UR	DURGANAGAR, ISLAMPUR, UTTAR DINAJPUR, WEST BENGAL, PIN-733202.	DAKSHIN DINAJPUR
6	74621	MR. VISHNU NISHAD	UR	PITAIBAND PARSADA JOSHI, RAJIM, GARIYABAND, CHHATTISGARH, PIN-493885.	PASCHIM MEDINIPUR
7	74470	MR. RAMANUJ KUMAR	UR	BHATU BIGHA, BHATHAR, THARTHARI, NALANDA, BIHAR, PIN-801307	NORTH 24 PARGANAS
8	74599	MR. SANJAY KUMAR GUPTA	UR	138K SAHUPARA, SIRSI, SURAJPUR, CHHATTISGARH, PIN-497231	PURULIA

*(Signature)*

*(Signature)*

The above mentioned candidates are hereby engaged as per the terms and condition mentioned below:

- 1) The order of engagement will take effect from the date he/ she joins the position.
- 2) This engagement is purely on contract basis and will automatically be terminated after expiry of **31.03.2018**.
- 3) If the incumbent propose to cease his/her work without covering 1 month's notice period, his/her remuneration will be deducted accordingly.
- 4) The period of contract may be extended further on the basis of satisfactory performance.
- 5) The service may also be terminated by one month's notice from either side.
- 6) Payment of remuneration will be made from **NHM Flexipool "B"** fund.
- 7) The candidates are directed to report for joining the position at the office of the Chief Medical Officer of Health of their respective district /HD (place of posting) as mentioned against their names with **downloaded engagement order, photo identity proof** issued by appropriate authority, **release order** (applicable for those who are already engaged) and **Medical Fitness Certificate** (enclosed herewith) issued by the registered M.B.B.S. practitioners.
- 8) After downloading the engagement order the candidates should join within **15 days** from the date of issuance of this order along with all the documents mentioned in above mentioned point no 7.
- 9) Any person failing to report to the designated office within stipulated period, may not be allowed to join later and his/her engagement order stands cancelled after that period.
- 10) No T.A. / D.A. is admissible for joining.



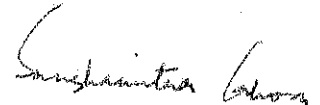
**Executive Director,  
WBSH & FW Samiti**

Date: 01.09.2017

No: HPH/NPPCD/12/2014/ 8506 /1(23)

Copy forwarded for information and necessary action to:

1. The DHS, Department of Health & Family Welfare, Govt. of West Bengal.
2. The Jt. DHS, NCD.
3. The Sr. Regional Director, Govt. of India.
4. The Head of the Deptt., ENT Deptt., IPGME & R & SSKM Hospital.
5. The Dy DHS (NCD-1) & SNO, NPPCD, Department of Health & Family Welfare, Govt. of West Bengal.
- 6-13. The Chief Medical Officer of Health, ..... district / health district with a request to allow the candidates to join the position.
- 14-21. The Dy. CMOH-II & Nodal Officer, NPPCD, ..... district / health district.
22. The Sr. AO, NHM, Department of Health & Family Welfare, Govt. of West Bengal
23. The Manager, HR Cell, GTZ Building, Swasthya Bhawan.



**Executive Director,  
WBSH & FW Samiti**

**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 :

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