

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/ 8507.

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 **Audiologist under NPPCD** on contract basis with a consolidated monthly remuneration of **Rs. 30,000/-** (Rupees Thirty 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	74504	MRS. SUSMITA SAHA	UR	A-11/274 KALYANI, NADIA, WEST BENGAL, PIN-741235.	HOWRAH
2	74381	MR. SANJOY KUMAR GHOSH	UR	308 DURGABARI PARA, GANGARAMPUR, DAKSHIN DINAJPUR, WEST BENGAL, PIN-733124	DAKSHIN DINAJPUR
3	74533	SK KABIRUL ISLAM	UR	CHICHURIA ROAD, HOSPITAL PARA, BETHUADAHARI, NAKASHIPARA, NADIA, WEST BENGAL, PIN-741126.	MURSHIDABAD
4	74261	MR. AVISHEK GHOSH	UR	CHANDIPUR, GOPINATHPUR, KOTULPUR, BANKURA, WEST BENGAL, PIN-722161.	BISHNUPUR HD
5	74439	MR. MANOJ KUMAR	UR	BHATU BIGHA, BHATHAR, THARTHARI, NALANDA, BIHAR, PIN-801307.	PASCHIM MEDINIPUR
6	74468	MR. SOUMYADIP MONDAL	UR	20.B KALITALA ANANDAPALLY, SRIPALLY, BARDHAMAN, WEST BENGAL, PIN-713103.	RAMPURHAT HD
7	74464	MR. JAMES MATHEW TUDU	UR	SHIV PAHAR CHOWK, RAM RATAN SINGH MARG, DUMKA, SHIV PAHAR TOWN, THANA- DUMKA, JHARKHAND, PIN-814101.	BIRBHUM
8	74394	MR. DEBASIS MODAK	UR	544 C P ROAD, PURULIA, WEST BENGAL, PIN-723101.	PURULIA
9	74571	MS. DIPTI PRAGYAN SAMANTARAY	UR	783, SAI VIHAR DURGAMADHAB NAGAR, LANE-11B, BHUBANESWAR, LAXMI VIHAR KHANDAGIRI, KHURDHA, ODISHA, PIN-751003	PURBA MEDINIPUR
10	74430	MS. KUMARI SMITA	UR	C/O BINOD KHEMKA, EAST BHIKACHAK ANISABAD, GARDANI BAGH, PATNA, BIHAR, PIN-800002.	BANKURA

(Signature)

(Signature)

Sl No	Reg ID	Name of the Candidate	Caste	Address	Place of Posting
11	74573	MS. SUJATA MULIA	UR	JHANJIR MANGALA, LUNIA SAHI, CUTTACK, TALA TELENGA BAZAR, BADAMBADI, CUTTACK, ORISSA, PIN-753009.	JHARGRAM HD

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.

Sanchaitra Ghosh

**Executive Director,
WBSH & FW Samiti**

Date: 01/09/2017

No: HPH/NPPCD/12/2014/8507/1(31)

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.
- 6-17. The Chief Medical Officer of Health, district / health district with a request to allow the candidates to join the position.
- 18-29. The Dy. CMOH-II & Nodal Officer, NPPCD, district / health district.
30. The Sr. AO, NHM, Department of Health & Family Welfare, Govt. of West Bengal
31. The Manager, HR Cell, GTZ Building, Swasthya Bhawan.

Amit

Sanchaitra Ghosh

**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)

Signature of Candidate

Attested