



Government of West Bengal
Office of the Chief Medical Officer of Health Alipurduar
Babupara, Maya Talkies Road, Ward No-12,
District-Alipurduar, Pin: 736121
Tele:03564-257200, email:cmohapd@gmail.com



Memo. No. DH&FWS/APD/2022-23/No. 1233

Date: 10.03.2023

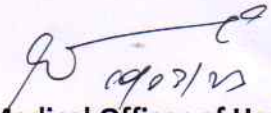
ENGAGEMENT ORDER

In accordance to the notification, vide memo no. DH&FWS/APD No.1512 Dated 08.02.2021 of CMOH & Secretary, DH&FW Samiti, Alipurduar the following candidate has been selected and appointed as **Social Worker (NHMP) under NHM among the post of Psychiatric Social Worker/Social Worker under NHM** on contractual basis at a monthly consolidated remuneration of Rs. 18,000/- (Rupees Eighteen Thousand) only as listed below.

Sl. No.	Name of the Candidate	Guardian's Name	Address	Date of Birth	Place of Posting
1.	SUSMITA GOSWAMI	SWAPAN GOSWAMI	HOSPITAL PARA, KOTWALI, JALPAIGURI,735101	0908-1982	Alipurduar, District

The above-mentioned candidate is hereby engaged as per the terms and condition mentioned below:

1. The order of engagement will take effect from the date she join the post at the Office of the undersigned at Alipurduar.
2. The period of contract may be extended subject to approval of the position in the next financial year and satisfactory performance.
3. The service may also be terminated by one (01) months' notice from either side. If the incumbent proposes to cease her work without covering one (01) months' notice period, their remuneration will be deducted accordingly.
4. Payment of remuneration will be made from the respective programme fund and as per norms of Govt. of West Bengal and District Health & Family Welfare Samiti.
5. The candidate directed to report for joining the post at the office of the undersigned at Alipurduar and mentioned against her name with downloaded engagement order from the website www.wbhealth.gov.in along with photo identity proof (Voter card/Aadhaar card/Passport).
6. The candidate has to produce a **Medical Fitness Certificate from the Registered Medical Practitioner (holding MBBS degree) in the enclosed format.**
7. The candidate should join on any working day on or before **24.03.2023** and submit NOC from the previous employer (if engaged anywhere)
8. If the candidate fail to report to the office of the undersigned at Alipurduar, within stipulated period, she will not be allowed to join later and her engagement will stand cancelled after that period and the vacant post will be filled up by the next meritorious candidate as per waiting list.
9. The Candidate will not be entitled for annual Increment for 03 (Three) consecutive financial years i.e.2022-23, 2023-2024 & 2024- 2025.
10. No TA/DA is admissible for joining.


Chief Medical Officer of Health & Secretary
DH&FWS, Alipurduar



Government of West Bengal
Office of the Chief Medical Officer of Health Alipurduar
Babupara, Maya Talkies Road, Ward No-12,
District-Alipurduar, Pin: 736121
Tele:03564-257200, email:cmohapd@gmail.com



Memo. No. DH&FWS/APD/2022-23/No. 1233/1(5)

Date: 10.03.2023

Copy forwarded for information to:

1. The Chairman, District Level Selection Committee, Alipurduar
2. The District Magistrate, Alipurduar
3. The ADM (Health), Alipurduar
4. The SDO, Alipurduar
5. The DMDC & OC (Health), Alipurduar

[Signature]
10/03/23
Chief Medical Officer of Health & Secretary
DH&FWS, Alipurduar

Memo. No. DH&FWS/APD/No. 1233/1(14)

Date: 10.03.2023

Copy forwarded for information and necessary action to :-

1. The Mission Director (NHM) & Executive Director, West Bengal Health & Family Welfare Samiti
2. The Director of Health Services, Govt. of West Bengal, Swasthya Bhawan
3. The PO-I, NHM, Deptt. of H&FW, Govt. of West Bengal
4. The DDHS(HA), Govt. of West Bengal, Swasthya Bhawan
5. The Dy. CMOH-I/Dy. CMOH-II/ Dy. CMOH-III/ Dy. CMOH-IV/DMCHO/DPHNO, Alipurduar
6. The Superintendent, District Hospital, Alipurduar
7. The ACMOH/DTO, Alipurduar
8. The Accounts Officer, O/o the CMOH, Alipurduar
9. **The DIO, NIC, Alipurduar, Dooarskanya, Alipurduar with request to publish the advertisement in the website www.alipurduar.gov.in**
10. **The System Coordinator, IT Cell, Health & Family Welfare Department, Swasthya Bhawan, Kolkata-91 with request to publish the advertisement in the website www.wbhealth.gov.in**
11. The HR Cell, Swasthya Bhaban, Kolkata
12. SUSMITA GOSWAMI for compliance
13. The DPMU, Alipurduar
14. Office Copy

[Signature]
10/03/23
Chief Medical Officer of Health & Secretary
DH&FWS, Alipurduar



Government of West Bengal
Office of the Chief Medical Officer of Health Alipurduar
Babupara, Maya Talkies Road, Ward No-12,
District-Alipurduar, Pin: 736121
Tele:03564-257200, email:cmohapd@gmail.com



Memo. No:- DH & FWS/APD/1234

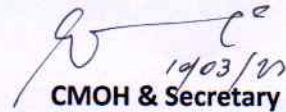
Dated: 10.03.2023

ORDER

In reference to Memo no. DH&FWS/APD No.1512, dated: 08.02.2021, the details of the **selected and wait listed** candidates for the position of **Psychiatric Social Worker/ Social Worker (NMHP) under NHM** are as follows: -

Sl. No.	Name	Guardian Name	Address	D.O. B	Remarks (Eligible candidates for Social Worker post)
1.	SUSMITA GOSWAMI	SWAPAN GOSWAMI	HOSPITAL PARA, KOTWALI, JALPAIGURI, 735101	09-08-1982	Selected
2.	BISWAJIT SASMAL	MADAN SASMAL	TULSIBERIA, RAJAPUR, HOWRAH, 711401	10-08-1991	Wait listed-1
3.	BIKASH BASAK	JAGABANDHU BASAK	GHO GARKUTHI, TUFANGANJ, COOCHBEHAR, 736156	12-05-1985	Wait listed-2
4.	SIMA KARMAKAR	RAMESWAR KARMAKAR	SHIKARPUR, COLONY CHAMTA, TUFANGANJ, COOCHBEHAR, 736159	05-01-1993	Wait listed-3
5.	RAJU DAS	GOPAL DAS	STATION ROAD, KAMATFILBARI, TUFANGANJ, COOCHBEHAR, 736159	07-04-1989	Wait listed-4

The panel will remain valid for 1 (One) year from the date of engagement notice.

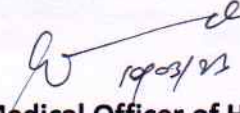

14/03/23
CMOH & Secretary
District Health & Family Welfare Samiti
Alipurduar

Memo. No. DH&FWS/APD/2022-23/No. 1234/1(5)

Date: 10.03.2023

Copy forwarded for information to:

1. The Chairman, District Level Selection Committee, Alipurduar
2. The District Magistrate, Alipurduar
3. The ADM (Health), Alipurduar
4. The SDO, Alipurduar
5. The DMDC & OC (Health), Alipurduar

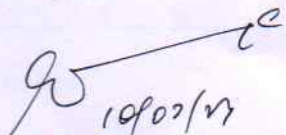

10/03/23
Chief Medical Officer of Health & Secretary
DH&FWS, Alipurduar

Memo. No. DH&FWS/APD/No. 1234/1(15)

Date: 10.03.2023

Copy forwarded for information and necessary action to :-

1. The Mission Director (NHM) & Executive Director, West Bengal Health & Family Welfare Samiti
2. The Director of Health Services, Govt. of West Bengal, Swasthya Bhawan
3. The PO-I, NHM, Deptt. of H&FW, Govt. of West Bengal
4. The DDHS(HA), Govt. of West Bengal, Swasthya Bhawan
5. The Dy. CMOH-I/Dy. CMOH-II/ Dy. CMOH-III/ Dy. CMOH-IV/DMCHO/DPHNO, Alipurduar
6. The Superintendent, District Hospital, Alipurduar
7. The ACMOH/DTO, Alipurduar
8. The Accounts Officer, O/o the CMOH, Alipurduar
9. **The DIO, NIC, Alipurduar, Dooarskanya, Alipurduar with request to publish the advertisement in the website www.alipurduar.gov.in**
10. **The System Coordinator, IT Cell, Health & Family Welfare Department, Swasthya Bhawan, Kolkata-91 with request to publish the advertisement in the website www.wbhealth.gov.in**
11. The HR Cell, Swasthya Bhaban, Kolkata
12. PANKAJ KUMAR RAY for compliance
13. Manik Sakar for compliance
14. The DPMU, Alipurduar
15. Office Copy


10/03/23
Chief Medical Officer of Health & Secretary
DH&FWS, Alipurduar

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 an account of :

iii. Temporarily unfit on account of :

Dated:

Signature of the Medical Practitioner

Name :

Degree :

Regn. No. :

(Seal)

Signature of Candidate

Attested