



Government of West Bengal
Department of Health & Family Welfare
Office of the Chief Medical Officer of Health
P.O. Kalimpong- 734301
Email- cmohkalimpong1@gmail.com

1. Notification Number : DH&FW/COV/001
2. Name of the Post : Medical Technologist (Critical Care)
3. No. of Post : 2: (SC:1 & ST:1)
4. Place of Engagement : Tribeni COVID Hospital, Darjeeling
5. Nature of Engagement : Purely on Contractual Basis
6. Eligibility Criteria : - i) Passed in H.S. (10+2) or equivalents with Physics, Chemistry and Biology
ii) 2 year Diploma in Critical Care Technology from State Medical Faculty, West Bengal **OR** Bachelor Degree in Critical Care Technology from any recognized University
7. Age : Not less than 21 years and more than 39 years on 1.1.2020
8. Remuneration : Rs. 20,000/- consolidated per month
9. Method of Selection : Scoring & walk-in-interview
10. Date : 04-01-2021
11. Venue : Office of the Chief Medical Officer of Health, Kalimpong
12. Time : 11 A.M onwards up to 3 PM


Scoring will be done on the as per the following criteria:-

H.S. (10+2) Examination or its Equivalent	Diploma/Degree in concerned discipline	Interview	TOTAL
30(based on % of marks obtained in the examination)	60(based on % of marks obtained in the examination)	10	100 points

Candidates must obtain at least 50% marks to qualify for the post

Note: For the abovementioned position the application must be permanent resident of West Bengal .Age relaxation will be given for the reserved candidates as per govt. Norms.


21/12/2020
Dy CMOH - I, Kalimpong
& Nodal Officer
(Tribeni COVID Hospital)
Dy. Chief Medical Officer of Health-1
Department of Health & Family Welfare
Govt. of West Bengal
Kalimpong


21/12/2020
Chief Medical Officer of Health
Member Secretary
DH & FWS Kalimpong
and CMOH Kalimpong

APPLICATION FORMAT

To,
The Chief Medical Officer of Health,
Kalimpong.

Application Number:-

Space use for office use only

Subject: Application for the post of _____

Space for pasting
recent passport size
colour photograph of
the candidate with
his/ her full signature
there on

1. Name in Full (In BLOCK Letter):- _____

2. Sex (Put a tick) :-

MALE

FEMALE

3. Father's/ Mother's Name :- _____

4. Date of Birth :- _____ / _____ / _____ (DD/MM/YY)

5. Age (as on date of Advertisement) :- _____

6. Nationality :- _____

7. Caste (SC/ST/OBC-A/OBS-B/ UR):- _____

8. Address for communication:

9. Permanent Address:- _____

10. Contact Number – Landline (with STD Code) _____ / Mobile

11. Email ID: _____

Qualification	Year of Passing	Subject(s)	University/ Board/ Institute	Total marks	Marks Obtained	Percentage of marks Obtained

13. Desirable Qualification:- _____

14. Computer Knowledge:- _____

15. List of Self attested Photocopies- Documents enclosed (NO other documents except mentioned below is required (Put Tick Mark in the box):-

Sl. No	Documents	Yes	No	Sl. No	Documents	Yes	No
01	One Color Passport size Photograph			02	Voter ID Card/ Aadhar card for verification of identity		
03	Ration card/ Electricity bill for verification of residential proof			04	Mark sheet & Certificates of Educational Qualifications as per eligibility criteria		
05	Certificates of experiences duty issued by the appropriate authority						

N.B :-

- Any Attempt to unduly influence the selection process will lead to automatic disqualification of the application.
- The decision of the Competent Authority regarding the recruitment is final.

Declaration

I solemnly declare that all statements made in this application are true, complete and correct. Original documents will be procured on demand. I understand that the concerned authority reserve the right to reject my candidature upon short listing of the candidate based on qualification and experience.

Place _____

Date _____

Signature of the Candidate in Full