

DISTRICT HEALTH & FAMILY WELFARE SAMITI PURBA MEDINIPUR DISTRICT

Registration No. – S/IL/10904 of 2002 – 2003

Tamluk, Purba Medinipur, PIN – 721636

Memo No. CMOH/Pbmd/ 1472

Date – 16.03.2023

RECRUITMENT NOTICE

Applications are invited from eligible candidates for engagement of different categories of staff under NHM / NUHM Programme and to be posted in different health unit in Purba Medinipur. It is also mentioned that the vacancy may vary. Details are given in the table below:-

| Sl. No. | Programme Head | Name of post / Designation | No. of post | Age as on 01.01.2023 | Essential Criteria | Desirable/ preferential Criteria | Place of posting | Remuneration | Mode of selection |
|---------|----------------------|----------------------------|-------------------|---------------------------------------|---|---|-------------------------|--------------------------|--|
| 01 | NUHM | Pharmacist | 3 (1-SC, 2-UR) | Minimum 18 years and Maximum 40 years | The candidate should have two years Diploma in Pharmacy (D-Pharma) (ALLOPATHEIC) recognized by the Govt. of W.B and registered as "A" category Pharmacist under west Bengal Pharmacy Council. Weightage will be given for higher qualification. The candidates must have proficiency in Bengali and must have efficiency in computers including MS Office and internet. The applicants must be permanent resident of West Bengal. | - | Any ULB of the District | Rs.22,000.00 / per month | Academic – 85 [D-pharma 65, B-Pharma 75, M-Pharma 85] Computer Test – 15 (Qualifying Marks – Minimum 50%) |
| 02 | NTCP | Psychologist | 1 (UR) | 40 years | Post Graduate Degree in Psychology / MSW OR Graduate in Psychology / Trained in counselling with 2 years of experience in the field of counselling services. | - | District | Rs.25,000.00 / Month | Academic – 75 Experience – 20, Interview – 5 |
| 03 | Thalassaemia Control | Medical Officer | 1 (UR) | 63 Years | MBBS Degree recognised by MCI | i)DCH ii)Experience in working with Thalassaemia Patient | TCU, DH | Rs.60,000.00 / Month | Academic – 65, Experience – 20, Interview – 15 |
| 04 | NOHP | Dental Hygienist | 1 (UR) | Minimum 22 years & Maximum 40 Years | a) Diploma in Dental Hygienist Course from a DCI recognized institute. b) Valid registration from the WB Dental Council. c) At least 2 years of experience in a DCI recognized Dental College / CE registered Clinic. | - | DH Clinic | Rs.22,000.00 / per month | Academic – 60 Experience – 25 Interview – 15 |
| 05 | NVHCP | Peer Support | 1 (UR) | Up to 40 Years | Peer Support should be a person preferably with or recovered from the disease (Hepatitis B or Hepatitis C) with a minimum of HS (12 th level education). S/he must also have sound knowledge of the local language and working knowledge of English | - | DH | Rs.10,000.00 / per month | Academic – 85 Interview – 15, |

Note: Essential Qualification degree through Distance Learning Course or any open university will not be entertained.

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General Instructions to the Candidates / Applicants:

- A. **All Experience should be count after the completion of requisite qualification.**
- B. **Essential Qualification degree through Distance Learning Course or any open university will not be entertained.**
- C. Age relaxation will be given for the reserved candidates as per existing norms of the State Government.
- D. Applicants are requested to visit purbamedinipur.gov.in / www.wbhealth.gov.in at the URL "Recruitment" regularly for information/instruction issued from time to time.
- E. Application forms not properly filled in or incomplete Application forms are liable to be cancelled. If the application details submitted by the applicant differ with the original testimonials, that application shall be liable to be cancelled.
- F. If proper signature and photograph are not uploaded at the time of online application that application shall also be liable to be cancelled.
- G. The essential Qualifications mentioned are the minimum and mere possession of the same does not entitle the candidate to claim selection. All the essential qualification must have been completed within the last date of online application.
- H. Caste Certificate issued before the last date of application, by the competent authorities of West Bengal only will be accepted. In case of OBC candidates, category 'A' or 'B' must be mentioned specifically in the caste certificate; otherwise the caste certificate will not be accepted.
- I. In case of candidates with disabilities, Disability certificate issued before the last date of application, by the competent authorities of West Bengal will be accepted.
- J. Hard copy/ printed copy of the online registration form should be retained by all applicants for document verification purpose. Without registration form, no candidates will be entertained for original testimonials verification by the authority.
- K. **All marks must be calculated excluding marks of Additional Subject**, No rounding off of marks will be granted. Proportionate marking up to 2 decimal points will be considered.
- L. **Last date of registration and full submission of form : with in 5 PM on or before 31st March, 2023.**
- M. The candidates, who are found ineligible at any step of the above mentioned mode of selection, will not be called for the subsequent stages.
- N. The decision of the competent authority regarding the recruitment is final.
- O. **Application fees in the from of Demand Draft / Bankers cheque of Rs. 100.00 for General applicant and Rs. 50.00 for reserved categories to be submitted along with the application. The Demand Draft should be in favour of "District Health & Family Welfare Samiti, Purba Medinipur District" payable at Purba Medinipur OR Transfer the amount of Rs.100.00 / Rs.50.00 as the case may be to the Bank A/C No. – 0186012268866, PNB, Tamluk Branch, IFS Code – PUNB0018620. The proof of payment of application fees should be attached with the application (in case of Hard copy of application) but in case of online application the proof should be uploaded during submission of application. Applications not accompanied by proof of payment of fees will be summarily rejected and no further claim will be entertained.**
- P. Hard copy/print copy of the online registration form along with Demand Draft or Bankers cheque should be sent to the **Office of the Chief Medical Officer of Health, Purba Medinipur, Pin – 721636** within 5 PM on or before 31st March, 2023 positively by hand / post OR **in case of online application, the proof of payment should be uploaded during submission of application.** No Application will be accepted without submission of the required Demand Draft / Bankers cheque / online payment of fees.
- Q. No TA/DA will be paid to the candidates for the selection test/interview.

Candidates must Note:-

1. **The above mentioned posts are purely contractual in nature with initial period up to 31.03.2024** (Likely to be extended on satisfactory performance & approval of Govt.).
2. The decision of the selection will be final and binding on the candidates.
3. The tenure of engagement may be renewed on the basis of satisfactory performance and approval of state authority.
4. It is also mentioned that the **eligible candidates will have to go through all stages of recruitment, if a candidate skips any stages, s/he will be disqualified immediately.**
5. The candidate who will apply through online should upload filled up **APPLICATION FORM** duly signed by the candidate along with all other related documents.
6. Duplicate application will be summarily rejected.
7. No documents will be considered to be added during verification except those for which candidate states "Applied for" in the application. Such candidates will be rejected if the specific document is not produced in original during verification.

The candidates may apply as per **FORMAT** annexed herewith on A4 size plain paper along with necessary supporting documents:

1. **One Self Attested Photograph** pasted on proper place of application format.
2. **Self Attested photocopies of –**
 - i) **Admit of Madhyamik / Equivalent (as proof of Age)**
 - ii) **Voter / ADHAAR Card (as proof of Address & Photo Identity)**
 - iii) **Caste Certificate (If any).**
 - iv) **All necessary Mark sheet of all educational qualification starting from Madhyamik/Equivalent.**
 - v) **Experience Certificate (Offer/Joining letter will not be considered) from appointing authority mentioning joining date, tenure & date of resignation/retirement (if applicable).**
 - vi) **NOC of Employer wherever applicable.**

The application by post / by hand / through link <https://sites.google.com/view/cmohpurbamedinipur/home> should reach to the Office of the CMOH & Secretary, District Health & Family Welfare Samiti, Purba Medinipur, Pin-721636 with mentioning "Application for the post of ----- within 5 PM on or before 31st March, 2023 positively. The applicants who will apply through online they need not submit hard copy of the application by post / hand. Any application received after 5 PM on 31st March, 2023 will summarily be rejected without assigning any reason. The selection committee will not be responsible for any delay in submission of the application due to internet problem, postal delay etc.

List of all eligible candidates along with details of Scheduled date for Written Test / Computer Test / Interview / Document verification will be published in the Notice Board of the Office of the CMOH, Purba Medinipur and also in the website in due time.



CMOH & Secretary
District Health & Family Welfare Samiti
Purba Medinipur

APPLICATION FORMAT

To,
The CMOH & Secretary,
District Health & Family Welfare Samiti,
Purba Medinipur



APPLICATION FOR THE POST OF _____

Sir,
In response to your advertisement notice no. _____ Date _____
for the post of _____ Post Sl. No. _____, I prefer myself as a candidate. Details
of my BIO-DATA is given below :

- 1. Name (IN BLOCK LETTERS) :
- 2. Father's Name :
- 3. Husband's Name (for married female) :
- 4. Date of Birth (DD/MM/YYYY) :
- 5. Sex :
- 6. Marital Status :
- 7. Caste / Category (Put Tick Mark) : GEN SC ST OBC-A OBC-B PH
- 8. Address (as mentioned in EPIC/ADHAAR) :

- 9. Mobile Number :
- 10. e-Mail ID :
- 11. Qualification Details :

| Sl. No. | Qualification | Year of Passing | Board / University | Total Marks | Marks Obtained | Percentage |
|---------|------------------------|-----------------|--------------------|-------------|----------------|------------|
| 01 | Madhyamik / Equivalent | | | | | |
| 02 | HS / Equivalent | | | | | |
| 03 | Graduation | | | | | |
| 04 | Post Graduation | | | | | |
| 05 | Others (give details) | | | | | |

***For Madhyamik calculate marks obtained except additional marks. For HS calculate marks obtained as total of two compulsory languages and best three of rest subjects. For honours graduates calculate total marks & marks obtained only for Honours Subjects.**

12. Computer Knowledge details :

| Sl. No. | Name of Institution | Year of Passing | Course Duration | Course Name & Modules Covered |
|---------|---------------------|-----------------|-----------------|-------------------------------|
| 01 | | | | |

13. Experience Details (*Experience Certificate is to be enclosed. Offer letter, Joining order will not be considered for this purpose*). :

| Sl. No. | Details of employer (Organisation Name & Address) | Joining Date | Working Tenure (In complete Years) | Designation & JOB DESCRIPTION |
|---------|--|--------------|---------------------------------------|-------------------------------|
| 01 | | | | |
| 02 | | | | |

Declaration

I do hereby declare that particulars furnished above are all correct. I shall be liable to punished as per law, if found incorrect.

Place :

Date :

Signature of Applicant