

GOVERNMENT OF WEST BENGAL
DIRECTORATE OF HEALTH SERVICES
NURSING SECTION
SWASTHYA BHAWAN, WING-'A', 1ST FLOOR,
GN-29, SECTOR-V, SALT LAKE, KOLKATA- 700091.

No. HNG/7L-73-2020/ 1116

Date: 24/12/2020

To
The Superintendent,
Imambara District Hospital, Hooghly.

Sub:- Regularisation of the period of absence w.e.f. 23.10.2017 to 12.09.2018 i.r.o. Maya Dey, Staff Nurse, Gr. II attached to your hospital.

Ref:- Your memo No. DH/HGL/5117 dt. 27-11-2018

In context of the above mentioned subject and reference, you are hereby requested to furnish the following documents/take following necessary steps:

- 1) Documentary evidence whether Maya Dey intimated the local authority from time to time about her absence from duties w.e.f. 23.10.2017 to 12.09.2018 (325 days).
- 2) Detailed Leave Statement showing therein leaves (Earned Leave, Half Pay Leave etc.) due at credit in respect of Smt. Dey as on 23.10.2017.
- 3) Leave admissibility report of Smt. Dey as on date.

Bm
24/12/2020
Dy. Director of Health Services
(Nursing) Govt. of West Bengal

No. HNG/7L-73-2020/ 1116 (1(3))

Date: 24/12/2020

Copy forwarded for information & necessary action to:

- 1) The Nursing Superintendent, Imambara District Hospital, Hooghly
- 2) Smt. Maya Dey, Staff Nurse, Gr. II, Imambara District Hospital, Hooghly
- 3) Guard File/Office Copy

Bm
24.12.2020
Dy. Assistant Director of Health Services
(Nursing), West Bengal