

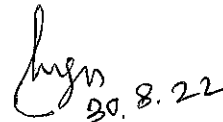
GOVERNMENT OF WEST BENGAL  
DIRECTORATE OF HEALTH SERVICES  
NURSING BRANCH  
SWASTHYA BHAWAN(1<sup>st</sup> floor), WING-A  
GN-29, SECTOR-V, SALT LAKE CITY  
KOLKATA-700091

No. HNG/3M-48-2021 | 1121

Dated: 30.8.22

Notice

All Gr.I(ii) Nursing Personnel under WBNS cadre of this Directorate who joined in Gr.I(ii) post i.e. Sister-in-charge/Sister Tutor/Sr.PHN in the year 2014,2015 and 2016 are hereby directed to submit bio-data in hard copy to the office of the undersigned within 19<sup>th</sup> September,2022 as per enclosed proforma to prepare a data base.

  
30.8.22  
Dy. Director of Health Services,  
( Nursing), W.B.

A.M.  
30/8

Proforma

1. Name (in Block letter) :
2. Employee ID :
3. Date of birth :
4. Whether SC/ST/OBC :
5. Date of entry into Govt. Service :
6. Date of joining in Gr.I(ii) post with order No. :
7. Mention about Surname change,if any :
8. Name of the present place & designation  
With date of joining :
9. Details of previous place of posting : a) Place \_\_\_\_\_ from \_\_\_ to \_\_\_\_\_  
With date & year b) Place \_\_\_\_\_ from \_\_\_ to \_\_\_\_\_  
c) Place \_\_\_\_\_ from \_\_\_ to \_\_\_\_\_
- 10 .Mention whether M.Sc(Ng) is completed or undergoing:
11. Contact No :

Signature of the applicant

Above information are verified from Service Book& other office records.  
Signature of forwarding authority with date & Stamp