

**GOVERNMENT OF WEST BENGAL
DIRECTORATE OF HEALTH SERVICES
SWASTHYA BHAWAN, BLOCK GN 29, SECTOR-V,
SALT LAKE CITY, KOLKATA-700 091**

No. HFW-24011(99)/177/2022-MERT /A 6253


Date 07/11/2022

MEMORANDUM

Provisional permission is hereby accorded in favour of the following candidates mentioned in the table below to appear in the Institute of National Importance Combined Entrance Test (INI-CET) for admission to PG Medical Courses for January 2023 Session subject to fulfilling of existing terms and conditions, in the courses as mentioned .

Sl No	Name	Cadre	Designation	Present place of posting	Institution & Subject
1	Dr. Asim Kumar Nandi	WBHS	GDMO	Hetia PHC, Bishnupur HD	<ol style="list-style-type: none">1. PGIMER Chandigarh –All Subject in sponsored category2. JIPMER, Puducherry - Paediatrics3. AIIMS- subject sponsored which is not available in this state
2	Dr. Amrita Saha	WBHS	GDMO	SNCU, Dr. B.C.Roy PGIPS, Kolkata	<ol style="list-style-type: none">1 PGIMER Chandigarh –All Subject in sponsored category2. JIPMER, Puducherry – Emergency Medicine

That there will be no financial involvement so far as T.A./D.A. on the part of the Government;
All concerned are informed accordingly.


Director of Health Services
Govt. of West Bengal
LM
4/11/22



Continue

No. HFW-24011(99)/177/2022-MERT /A 6253/1 (11)

Date 07/11/2022

Copy forwarded for information & necessary action to the---

- 1.The Principal Accountant General (A & E), West Bengal, Treasury Building, 2, Govt. Place(West), Kolkata-01
- 2.Additional Director of Health Services (AA&V), West Bengal.
- 3.Deputy Director of Health Services (Admn), West Bengal.
- 4. Assistant Director of Health Services (P&E), West Bengal.
- 5.Assistant Director of Health Services (Accounts), West Bengal
- 6.The CMOH/Principal/MSVP /
Superintendents/ACMOH/BMOH,concerned.....
- 7..Treasury Officer, Concerned
- 8.Dr.
- 9.
- 10.Co-ordinator, IT Cell, of this Department; to post the order at department Website
- 11. O/c


 07/11/2022
 Dy. Director of Health Services (MERT)
 Govt. of West Bengal

 7/11/22

No. - A 6253

Date - 07/11/2022

IP :-103.211.133.152

Date :-15/10/2022



P6121034107

Appendix E for Sponsorship certificate

Form of Sponsorship Certificate for admission in INIs through INI-CET

1. Please tick [✓] as applicable (one or more) OR Please mark [x] as not applicable.

[✓] For Sponsorship/Deputation at **PGIMER, Chandigarh**, I certify that Dr./Miss/Mrs./Mr. **ASIM KUMAR NANDI** is being sponsored for training leading to the award of MD/MS/MCH(6YRS)/DM(6YRS)/MDS Degree in respective allotted discipline at **PGIMER, Chandigarh** for the session commencing in **Jan 2023**.

[✓] For Sponsorship at **JIPMER, Puducherry**, I certify that Dr./Miss/Mrs./Mr. **ASIM KUMAR NANDI** is being sponsored for training leading to the award of MD/MS/MCH(6YRS)/DM(6YRS) Degree in **Paediatrics** at **JIPMER, Puducherry** for the session commencing in **Jan 2023**.

[X] For Sponsorship at **NIMHANS, Bengaluru**, I certify that Dr./Miss/Mrs./Mr. **ASIM KUMAR NANDI** is being sponsored for training leading to the award of MD Degree in at NIMHANS, Bengaluru or the session commencing in **Jan 2023**. The candidate after getting training at National Institute of Mental Health and Neuro Sciences (NIMHANS), Bengaluru, shall continue to be in regular service with the State/Central Government or Public Sector Undertaking of State/Central Government (**tick which is applicable**) and will work in the State/Central Government or Public Sector Undertaking of the State/Central Government (**tick which is applicable**).

[✓] For Sponsorship on **AIIMS, New Delhi, AIIMS Rishikesh and SCTIMST, Trivendrum Seats** I certify that :-

a. Dr./Miss/Mrs./Mr. **ASIM KUMAR NANDI** is being sponsored for training leading to the award of MD/MS/MDS Degree in **Palliative Medicine** at **AIIMS NEW DELHI** for the session commencing in **Jan 2023**.

b. For AIIMS Delhi, AIIMS Rishikesh and AIIMS Raipur that Post-Graduate MD/MS/MDS course for which the candidate is being sponsored, is not available in this State.

2. That Dr./Miss/Mrs./Mr. **ASIM KUMAR NANDI** son/daughter of **CHANDI CHARAN NANDI** date of birth **09 Jan 1975** is a permanent employee of **WEST BENGAL HEALTH SERVICES** (Name of the Organization) since **02.01.17** (DATE) and has been working for three years. Sponsoring/deputation will be accepted only from following type of organizations, please tick [✓] as applicable :-

(a) Central Govt.

[] (b) State Govt.

[✓]

(C) Autonomous body of Centre/State Govt.

[] (d) Public Sector Undertaking

[]

*(e) Govt. Medical College/Hospital affiliated to a University and recognized by Medical Council of India
(only applicable for PGIMER, Chandigarh)

[]

3. That he/she after getting the training at respective INI as applicable, will be suitably employed by the sponsoring authority for at least 5 years in the specialty in which training is to be provided in the respective INI.
4. That the candidate will be paid all emoluments by the sponsoring authority during the entire training period. Such payment will not be the responsibility of the respective INI where admission taken or AIIMS, New Delhi.
5. That the candidate is being sponsored for the entire duration (including extended period for whatsoever reason if any) of the course as per rules applicable at respective INI.

Date:

Place:

Last date for upload scan copy of Sponsorship Certificate: by 5:00 pm on 11.11.2022. After due date Sponsorship Certificate will not be considered in any circumstance. [Candidate please note that ORIGINAL Sponsorship Certificate must be submit at the time of joining].

Signature of the Sponsoring Authority with Seal

Name: **Dr. Siddhattha Niyog**

Designation: **DHS, W.B.**
Director of Health Services
Government of West Bengal

- Kindly note that if the name of the subject is not mentioned with the name of the candidate, the seat allocation will not be done. The allocation will be done in only subject available in the Notice No. 148/2022 dated 11.10.2022 for seat position of Sponsored category).
- In case any discrepancy found in online data with Sponsorship certificate valid information as in Sponsorship certificate will be accepted as per eligibility criteria.
- Kindly note the proforma of Sponsorship certificate generated after registration from "MyPage" containing barcode and IP address dynamically generated from portal shall be submitted with signature & seal as mentioned in the proforma.

ANNEXURE – II

NO OBJECTION CERTIFICATE

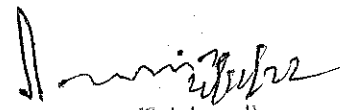
ENDORSEMENT BY THE EMPLOYER, IF THE APPLICANT IS IN SERVICE

No... AG253

Date... 07/11/2022

Forwarded to the REGISTRAR, Postgraduate Institute of Medical Education and Research, Chandigarh for consideration. The undersigned has no objection to Dr. ASIM KUMAR NANDI S/o CHANDI CHARAN NANDI being considered by the Institute for the course applied for by him/her and if selected, he/she will be relieved within the prescribed time limit. The applicant is "sponsored /deputed or not sponsored /deputed by us and the sponsorship/deputation - certificate is enclosed.

Address: _____


(Signature of employer with official seal)

Director of Health Services
Government of West Bengal

No. A 6253

Date: 07/11/2022

IP :-122.176.130.36

Date :-04/11/2022



P6151335224

Appendix E for Sponsorship certificate

Form of Sponsorship Certificate for admission in INIs through INI-CET

1. Please tick [] as applicable (one or more) OR Please mark [] as not applicable.

[] For Sponsorship/Deputation at **PGIMER, Chandigarh**, I certify that Dr./Miss/Mrs./Mr. **AMRITA SAHA** is being sponsored for training leading to the award of MD/MS/MCH(6YRS)/DM(6YRS)/MDS Degree in respective allotted discipline at **PGIMER, Chandigarh** for the session commencing in **Jan 2023**.

[] For Sponsorship at **JIPMER, Puducherry**, I certify that Dr./Miss/Mrs./Mr. **AMRITA SAHA** is being sponsored for training leading to the award of MD/MS/MCH(6YRS)/DM(6YRS) Degree in **Emergency Medicine** at **JIPMER, Puducherry** for the session commencing in **Jan 2023**.

[] For Sponsorship at **NIMHANS, Bengaluru**, I certify that Dr./Miss/Mrs./Mr. **AMRITA SAHA** is being sponsored for training leading to the award of MD Degree in at **NIMHANS, Bengaluru** or the session commencing in **Jan 2023**. The candidate after getting training at National Institute of Mental Health and Neuro Sciences (NIMHANS), Bengaluru, shall continue to be in regular service with the State/Central Government or Public Sector Undertaking of State/Central Government (**tick which is applicable**) and will work in the State/Central Government or Public Sector Undertaking of the State/Central Government (**tick which is applicable**).

[] For Sponsorship on **AIIMS, New Delhi, AIIMS Rishikesh and SCTIMST, Trivendrum Seats** I certify that: -

- a. Dr./Miss/Mrs./Mr. **AMRITA SAHA** is being sponsored for training leading to the award of MD/MS/MDS Degree in **General Medicine** at **AIIMS NEW DELHI and AIIMS RAIPUR** for the session commencing in **Jan 2023**.
- b. For AIIMS Delhi, AIIMS Rishikesh and AIIMS Raipur that Post-Graduate **MD/MS/MDS course** for which the candidate is being sponsored, is **not available in this State**.

2. That Dr./Miss/Mrs./Mr. **AMRITA SAHA** son/daughter of **ASIT BARAN SAHA** date of birth **15 Sep 1990** is a permanent employee of **Govt. of W.B.** (Name of the Organization) since (DATE) and has been working for three years. **Sponsoring/deputation will be accepted only from following type of organizations, please tick [] as applicable: -**

- | | | | |
|---|------------------------------|-------------------------------|------------------------------|
| (a) Central Govt. | [<input type="checkbox"/>] | (b) State Govt. | [<input type="checkbox"/>] |
| (C) Autonomous body of Centre/State Govt. | [<input type="checkbox"/>] | (d) Public Sector Undertaking | [<input type="checkbox"/>] |
| *(e) Govt. Medical College/Hospital affiliated to a University and recognized by Medical Council of India | | [<input type="checkbox"/>] | |
| (only applicable for PGIMER, Chandigarh) | | | |

3. That he/she after getting the training at respective INI as applicable, will be suitably employed by the sponsoring authority for at least 5 years in the specialty in which training is to be provided in the respective INI.

4. That the candidate will be paid all emoluments by the sponsoring authority during the entire training period. Such payment will not be the responsibility of the respective INI where admission taken or AIIMS, New Delhi.

5. That the candidate is being sponsored for the entire duration (including extended period for whatsoever reason if any) of the course as per rules applicable at respective INI.

Last date for upload scan copy of Sponsorship Certificate: **by 5:00 pm on 11.11.2022**. After due date Sponsorship Certificate will not be considered in any circumstance. [Candidate please note that ORIGINAL Sponsorship Certificate must be submit at the time of joining].

Date: _____
Place: _____

Signature of the Sponsoring Authority with Seal

Name: **Dr. Siddhartha Niyogi**

Designation: **DHS, W.B.**

Director of Health Services
Government of West Bengal

- Kindly note that if the name of the subject is not mentioned with the name of the candidate, the seat allocation will not be done. The allocation will be done in only subject available in the Notice No. 148/2022 dated 11.10.2022 for seat position of Sponsored category).
- In case any discrepancy found in online data with Sponsorship certificate valid information as in Sponsorship certificate will be accepted as per eligibility criteria.
- Kindly note the proforma of Sponsorship certificate generated after registration from "MyPage" containing barcode and IP address dynamically generated from portal shall be submitted with signature & seal as mentioned in the proforma.

IMPORTANT: