

Government of West Bengal
Directorate of Health Services
Nursing Section
Swasthya Bhawan, 1st Floor, Wing -A
GN-29, Sector -V, Salt Lake City, Kolkata-91

No HNG/4T-39-2018/ 481

Date 31.5. 2018

To :

The Principal/ Principal Nursing Officer/ Senior Sister Tutor -in-Charge ,
All Colleges of Nursing/ GNM Training Schools / In Service Training Schools / ANM Training Schools

Sub : Sanction of fund in respect of Menial staff / Warden / Contingency Fund/ POL / Hiring of vehicle

It is hereby informed that when the demand of fund for Menial staff / Warden /Contingency/P.O.L/Hiring of vehicle is furnished to this Directorate office , the proposal will contain the following items as follows for each above **in separate sheet** to the following Email;

minakshidas725@gmail.com /samarhazra002@gmail.com

A. In case of menial staff/ Warden :

1. Fund required for the financial year :
2. No of existing menial staff/ warden .
3. Whether extension order of engagement of menial staff/ warden has been obtained . If obtained , copy of the same for the financial year (in which fund is required)is to be enclosed . If not yet obtained , proposal for their extension is to be placed to this end .
4. Fund required for each menial staff/ warden per month .
5. Total fund required per year .
6. Utilisation Certificate of fund for the previous financial year.
7. Whether any balance exists .

B. In case of Contingency Fund :

1. Fund required for the financial year :
2. Name of the heads for which fund is required.
3. Total fund required .
4. Head of Account .
5. Balance if any.
6. Utilisation Certificate of fund for the previous financial year

C. In case of fund for POL :

1. Fund required for the financial year :
2. Km run on an average per day with special mention of the journey .
3. Quantity of POL required per day .
4. Cost of POL per day .
5. Cost of POL per month .
6. Cost of POL per year .
7. Utilisation Certificate of fund for the previous financial year

D. In case of Hiring of vehicle :

1. Fund required for the financial year :
2. Type of vehicle
3. Purpose of journey.
4. KM to be covered per day on an average .
5. KM to be covered per week on an average.
6. Fund required for Hiring of vehicle .
7. Utilisation Certificate of fund for the previous financial year

Those, who have not furnished the proposal in the above manner, are requested to send the proposal in the aforesaid manner.

This may be treated as URGENT .

Jt. Director of Health Services (Nursing)
Government of West Bengal

SHR
31.05.18

No HNG/4T-39-2018/ 481/1(2)

Date 31.5. 2018

Copy Forwarded for information & necessary action to :

1. The MSVP/ Superintendent -----

The MSVP s /Superintendents concerned are requested to co-operate in the matter of furnishing such proposal.

✓ 2. The in-Charge, I.T. Cell, Swasthya Bhawan Kolkata-91.

He is requested to display this in the website of Deptt. of Health & F.W. Immediately.

31.5.18
Jt. Director of Health Services (Nursing)
Government of West Bengal

S.H.
31.05.18