## DISTRICT HEALTH AND FAMILY WELFARE SAMITI OFFICE OF THE CHIEF MEDICAL OFFICER OF HEALTH PATPUR ROAD, POST+DISTRICT-BANKURA, 722101

No.: 424

Dated: 27.01.2017

## NOTICE FOR WALK -IN-INTERVIEW

Interested & eligible candidates fulfilling all the requirements are invited to appear before the recruitment committee for <u>Walk-in-Interview</u> at Meeting Hall, of CMOH Office Campus, Bankura, for engagement in the following post under deferent Health Program/Health Unit of Bankura District **purely on Contractual Basis** on the date as mention against each post from 11:00 a.m. onwards in each date.

#### I. Post Details:

	Name of the Programme	Sub		Date of	No. of vacancies							Consolidated	
SI. No.		ie SI.	Name of the posts	Walk-In- Interview	SC	SC- EC	ST	OBC -(A)	OBC -(B)	UR	UR- EC	Total	Remuneratio n / Month (Rs)
1	NHM	i)	Medical Officer	07/02/2017	-	_	-	-	12	10	-	10	40000.00
		i)	Medical Officer	07/02/2017	_	-	-	-	-	1	-	1	40000.00
2	Thalassaemia	ii)	GNM	07/02/2017	1	÷.		-	-	1	-	2	16860.00
		iii)	Counselor	08/02/2017	1	-	-	-	=	-	-	1	16860.00
3	NRC	i)	GNM	07/02/2017	3	-	1	1	1	6	-	12	16860.00
	NPHCE	i)	Physiotherapist	07/02/2017	14	-	-		-	1	-	1	20000.00
4		ii)	Hospital Attendant	08/02/2017	1	-	-	-a	s. <b>-</b> .	1	-	2	7500.00
		iii)	Sanitary Attendant	08/02/2017	1	-	-		-	1	-	2	7500.00
5	NCD	i)	Physiotherapist	07/02/2017	-	-	-		7-	1	-	1	20000.00
6	NLEP	i)	Paramedical Worker	08/02/2017	æ	-	1	= (=)	1.5	*	-	1	16000.00

N.B: SC=Scheduled Caste, ST= Scheduled Tribe, OBC-Other Backward Class, UR-Unreserved, EC= Exempted Category.

## II. Eligibility Criteria:

MEDICAL OFFICER (NHM)

NAME OF THE POST : Medical Officer

Number of Post : 10 [UR]
 Essential Qualifications : MBBS Degree recognised by MCI

Age Limit : 63 years.

Remuneration : Rs. 40000/- Per Month (Consolidated)

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#### MEDICAL OFFICER (THALASSAEMIA) 2.

NAME OF THE POST

: Medical Officer

Number of Post

: 01 [UR]

Essential Qualifications : MBBS Degree recognised by MCI

Preference

: DCH, Experience in working with Thalasemia patient

Age Limit

: 63 years.

Remuneration

: Rs. 40000/- Per Month (Consolidated)

#### 3. GNM (THALASSAEMIA)

NAME OF THE POST

: GNM

Number of Post

: 02 [SC-1, UR-1]

Essential Qualifications:

Completed GNM course recognised by Indian Nursing Council (INC)

Desirable: Experience in working with Thalassaemia patients & their families.

Age Limit

: Up to 40 Years (Relaxation for age will be given as per norms)

Remuneration : Rs. 16860/- + Rs. 300/- (washing Allowance) per Month (Consolidated)

#### COUNSELOR (THALASSEMIA)

NAME OF THE POST

: COUNSELLOR

Number of Post

: 01 [SC - 1]

**Essential Qualifications:** 

MA/ M.Sc. in Sociology / Applied Psychology

Desirable: Experience in working with Thalasamia patient & their families.

Age Limit

: Up to 40 Years (Relaxation for age will be given as per norms)

Remuneration

: Rs. 16860/- Per Month (Consolidated)

#### GNM (NRC)

NAME OF THE POST

Number of Post

: 12 [SC -3, ST- 01, OBC(A)- 01, OBC(B)- 01, UR - 06]

Essential Qualifications:

Completed GNM course recognised by West Bengal Nursing Council.

Desirable: Experience in working with Thalassemia patient & their families.

Age Limit

: Up to 40 Years (Age relaxation for reserved candidates will be given as per govt. norms)

Remuneration: Rs. 16860/- + Rs. 300/- (washing Allowance) per Month (Consolidated)

#### PHYSIOTHERAPIST (NPHCE)

NAME OF THE POST

: PHYSIOTHERAPIST

Number of Post

: 01 [UR - 1]

Essential Qualifications:

Bachelors in Physiotherapy.

> At least 2 years experience of working in a Hospital

**Age Limit** 

: Up to 40 Years (Relaxation for age will be given as per norms)

Remuneration

: Rs. 20000/- Per Month (Consolidated)

#### HOSPITAL ATTENDANT (NPHCE)

NAME OF THE POST

: HOSPITAL ATTENDANT

Number of Post

: 2 [SC-01, UR-01]

**Essential Qualifications:** 

Matriculation Passed.

> At least 2 years experience of working in a Hospital

Age Limit

: Up to 40 Years (Relaxation for age will be given as per norms)

Remuneration

: Rs. 7500/- Per Month (Consolidated)

8. SANITARY ATTENDANT (NPHCE)

NAME OF THE POST

: SANITARY ATTENDANT

Number of Post

: 2 [ SC-01, UR-01]

Essential Qualifications:

Matriculation Passed.

> At least 2 years experience of working in a Hospital

Age Limit

: Up to 40 Years (Relaxation for age will be given as per norms)

Remuneration

: Rs. 7500/- Per Month (Consolidated)

#### 9. PHYSIOTHERAPIST (NCD)

NAME OF THE POST

: PHYSIOTHERAPIST

Number of Post

: 01 [UR - 01]

Essential Qualifications : Bachelors in Physiotherapy.

Age Limit

: Up to 40 Years (Relaxation for age will be given as per norms)

Remuneration

: Rs. 20000/- Per Month (Consolidated)

#### 10. PARA MEDICAL WORKER (NLEP)

NAME OF THE POST

: PARA MEDICAL WORKER

Number of Post

: 01 [ST-01]

. A) Essential Qualifications:

Passed Secondary / Higher Secondary Examination.

Holding Certificate of PMW Training.

Master of Social Work (MSW) / B. Sc with.

3 Years experience in Health Sector.

B) Working knowledge of computer

Preference

: Experience in Leprosy, resident of respective Block/Municipality.

Age Limit

: Not exceeding 40 years or less on the date of the application (Age relaxation for

reserved candidates as per Govt. Norms.)

Remuneration

: Rs. 16000/- Per Month (Consolidated)

- III. Registration & Verification: From 10.00a.m. to 10.45 a.m.
- How to apply: A general application in plain paper addressed to the Member Secretary IV. CMOH, DH & FW Samiti, Bankura along with details CURRICULAM VITAE (CV) in prescribed format duly filled in and self attested copies all testimonials in Support of age, qualification, experience etc. to be submitted during registration for "Walk-in interview". All original testimonial to be shown during registration, interview whenever asked for. Candidates who are willing to apply for more than one post, separate application with all relevant documents including fees to be submitted for each post.
- Demand Draft (DD): An amount of Rs. 100.00 only for UR categories and Rs. 50.00 only for reserved (SC & ST only) categories through Demand Draft (DD) issued from any Nationalized Bank in favour of "District Health & Family Samity Bankura A/C construction" payable at Service Branch, Bankura must be submitted along with the application. Name of the applicant, name of the post must be written in the back side of the Demand Draft (DD). Demand Draft (DD) is subject to non refundable.
- VI. The Selection Committee reserves the right to accept or reject any or all applications and to add /alter/reject the vacancy position of any post without assigning any reason thereof.

District Health & Family Welfare Samity

## DISTRICT HEALTH AND FAMILY WELFARE SAMITI OFFICE OF THE CHIEF MEDICAL OFFICER OF HEALTH PATPUR ROAD, POST+DISTRICT-BANKURA, 722101

	APPLICATION FORM
	Under
Sl. No. of the post	Sub Sl.No
To The Member Secretary & CMOH District Health & Family Welfare Samiti, Office of the CMOH Tamlibandh, Patpur Road, Bankura-722101	Paste here self attested recent stamp size colour PHOTOGRAPH of the candidate
1. Name (CAPITAL LETTER)	:
2. Father's Name	:
3. Address for communication (Capi	tal Letter) :-
-	Village/Town/Road:
	Post Office : Police Station : District :
	Pin Code. :////
4. Date of Birth	DD MM YYYY
5. Age as on Advertisement Date	: YY MM DD
6. Sex (Tick)	: Male: ( ) Female: ( )
7. Category (Tick)	:
9. Francisch Cotagogy (FC)	GEN SC ST OBC-A OBC-B
8. Exempted Category (EC) : 9. Contact No	Yes / No
	•
10. e-mail id if any	: @.

11. Academic/Essential Qualification (Self attested copy must be submitted with the application):

SI. No.	Academic Qualification	Year of Passing	Name of the Board/Council/University	Subjects	Full Marks	Marks Obtained	Percentage (%)
(a)	Secondary						
(b)	Higher Secondary						
(c)	Graduation						
(d)	Post Graduation						

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# Page... 2 12.Professional / Technical / Computer Knowledge:

Sl. No.	Name of course	Name of Institute / Board / University	Year of passing	Duration of course	Subjects	Full Marks	Marks Obtained	Percentage (%)/ Grade
(a)								
(b)		-						
(c)								

13. Working Experiences (self attested photo copy of experience certificate etc. must be submitted):

Sl.No.	Name of	Name of	(Govt.,	From	To	Total Duration		
S1.NO.	the Posts	Organization	/ Pvt.)	(dd/mm/yyyy)	(dd/mm/yyyy)	YY	MM	DD
1								
2					2			
3								
			(	Frand Total				

## 14.Demand Draft (DD) Details:

Name of the Bank	Name of the Branch	DD Number	Amount of DD (Rs.)

Enclosure: Self attested photo copies in support of testimonials attached:

Sl. No.	Documents (Self Attested Legible Xerox copy)	Name of the authentic documents (like Admit, Mark sheet, Voter Card etc. as applicable)	Documents Submitted Yes/No
1	Age Proof		
2	Residential Proof		
3	Caste Certificate		
4	Secondary passed along with mark sheet		
5	HS passed along with mark sheet		
6	Graduate passed along with mark sheet		
7	Post Graduate passed along with mark sheet		
8	Mark sheet, certificate on Computer / Technical /Professional Knowledge or qualification		
9	Experience Certificates		
10	Others if any		

### **DECLARATION:**

I do hereby declare that the particulars / information furnished above are true, complete & correct to the best of my knowledge any belief. In the event of any information / particulars found to be false / incorrect, my candidature will liable to be cancelled/terminated without assigning any reason thereof.

Place:		
Date :		
	*	Full Signature of the Applicant

What Secretary Western Service