



Government of West Bengal
District Health & Family Welfare Samiti
Office of the Chief Medical Officer of Health
North 24 Parganas, Barasat



Memo. No. CMOH-NPG/NHM/2021/ 5012

Date: 12/6/21

ORDER

In reference to the Order No. CMOH-N24PGS/NHM/2021/4722, Dated 01.06.2021 the candidate of Annexure-A have been selected purely contractual basis at a monthly remuneration of **Rs. 22000/- (Rupees Twenty two thousand consolidated)** only against their **Name** and **Post**. The selected candidate will be posted in place as mentioned against the respective name "**Place of Posting**".

The candidates of **Annexure-A** are hereby engaged as per the terms and conditions mentioned below:-

1. The order of engagement will take effect from the date he/she joins the position.
2. The period of contract will automatically be terminated after expiry of 31.03.2022.
3. If the incumbent proposes to cease his/her work without covering 1 months' notice period, his/her remuneration will be deducted accordingly.
4. The service may also be terminated by one month's notice from either side.
5. The candidates are directed to report for joining for the position as per **Annexure-A** to the CMOH, North 24 Parganas.
6. The candidate should join within 25th June 2021.
7. Any person failing to report to designated office within stipulated period, may not be allowed to join later and his/her engagement stands cancelled after that period.
8. No TA/DA is admissible for joining.
9. Vacancy and Place of Posting may be changed in future and will be communicated in due course.
10. The candidate is instructed to bring three copies of joining letter on the date of joining at the office of the CMOH, North24 Parganas, District Hospital Campus, Barasat, Kolkata 700124.
11. The candidate is instructed to bring ID proof & original documents on the date of joining at the office of the CMOH, North24 Parganas, District Hospital Campus, Barasat, Kolkata 700124.
12. The Candidate has to produce a Medical Fitness Certificate from the registered Medical Practitioner (holding MBBS) in the enclosed proforma attached herewith (Annexure-B).

[Handwritten Signature]
12/06/2021

Chief Medical Officer of Health
North 24 Parganas

[Handwritten Initials]

Memo. CMOH-NPG/NHM/2021/ 5012/1(15)

Date: 12/6/21

Copy forwarded for information & necessary action please to: *[Signature]*

1. The Chairperson, DLSC, DH&FWS, North 24 Parganas
2. The Director of Health Services, Dept. H&FW, GoWB, Swastha Bhawan, Kol-91
3. The Mission Director NHM Dept. H&FW, GoWB, Swastha Bhawan, Kol-91
4. The District Magistrate, North 24 Parganas
5. The Commissioner Bidhannagar Municipal Corporation
6. The Chairperson of Concerned Municipalities
7. The Jt. DHS, NCD, Dpt. of H&FW, GoWB, Swastha Bhawan, Kol-91
8. The SNO, NUHM, Dpt. of H&FW, GoWB, Swastha Bhawan, Kol-91
9. The Dy.CMOH-I/II/III/ DMCHO/ZLO/DTO, North 24 Parganas
10. The OC, Health, North 24 Parganas
11. The Account Officer, O/o the CMOH, North 24 Parganas
12. The A.O.(I/II), O/o the CMOH, North 24 Parganas
13. The HR Cell, Dept. H&FW, NHM, Swastha Bhawan, Kol-91
14. DPM, DSM, DAM, North 24 Parganas
15. Guard file.

[Signature]
12/06/2021
Chief Medical Officer of Health
North 24 Parganas

[Signature]

Annexure-A**Laboratory Technician–NUHM (UR Category)**

Sl.	Application ID	Name of Applicant	Place of Posting
1	NUHM LT 084	Amitava Bhattachariya	Garulia
2	NUHM LT 177	Sushovan Pal	North Dum Dum
3	NUHM LT 185	Krishnendu Dhara	North Barrackpore
4	NUHM LT 123	Souvik Samanta	Khardah
5	NUHM LT 288	Ramesh Panja	North Dum Dum
6	NUHM LT 196	Jesmina Khatun	Naihati
7	NUHM LT 056	Masadul Alam	New Barrackpore
8	NUHM LT 109	Sumona Mondal	Baranagar
9	NUHM LT 302	Nilanjana Sen	Bidhannagar MC
10	NUHM LT 160	Debjit Maity	Panihati
11	NUHM LT 244	Swarnali Hazra	South Dum Dum

Laboratory Technician – NUHM (SC Category)

Sl.	Application ID	Name of Applicant	Place of Posting
1	NUHM LT 222	Krishnendu Biswas	Khardah
2	NUHM LT 234	Rahul Sarkar	Kanchrapara

for
Chinty
DNO-NUHM
North 24 Parganas

12/06/24
Chief Medical Officer of Health
North 24 Parganas

**Medical Certificate in case of appointment of candidates under
West Bengal State Health & Family Welfare Samiti**

Name of the candidate in full (in block letters) :
 Height (without shoe) : Cm.
 Weight : Kg.

"I hereby certify that I have examined Sri/Smt..... a candidate for employment in the West Bengal State Health & Family Welfare Samiti, and can't discover that Sri/Smt..... has any disease, (communicable or otherwise) constitutional weakness or bodily infirmity, except....."

I do not consider this a disqualification for employment in the office of State Samiti. Sri/Smt.....'s age is, according to his own statement..... Years, and by appearance about.....years".

- a. General Development : Good/Fair/Average/Poor
- b. Vision : Right eye: Left eye:
 i. Uncorrected/Naked eye :
 ii. Corrected :
 iii. Nature and degree :
- c. Teeth : d. Hearing : e. Blood pressure :
 f. Lung : g. Heart : h. Liver :
 i. Spleen :
- j. Hemia (present or absent) :
 k. Hydroceles (present or absent) :
- l. Urine i. Specific Gravity ii. Albumin iii. Sugar
- m. Identification marks :
 n. The Candidate is :

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 - ii. Corrected :
 - iii. Nature and degree :
- c. Teeth : d. Hearing : e. Blood pressure :
- f. Lung : g. Heart : h. Liver :
- i. Spleen :
- j. Hernia (present or absent) :
- k. Hydroceles (present or absent) :
- l. Urine i. Specific Gravity ii. Albumin iii. Sugar
- m. Identification marks :
- n. The Candidate is :

i. Fit :

ii. Unfit on account of :

iii. Temporarily unfit on account of :

Dated:

Signature of the Medical Practitioner

Name :

Degree :

Regn. No. :
(Seal)

Signature of Candidate

Attested