



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



Memo No. DH & FWS/NHM/2017/1892


Dated: 12/10/2017

ORDER

In reference to the recruitment notification no. DH&FWS/NHM/2015/1437 & dated 24.11.15 and DH&FWS/NHM/2016/1529 dated 02.11.16, the 3rd & final list of candidates enlisted in "Annexure-I" are hereby selected for the post of **Lab Technician under NUHM for UPHCs** on purely contract basis for a period upto 31.03.18 on a consolidated monthly remuneration of **Rs.9,380/- (Nine thousand three hundred eighty)** only and posted at UPHCs under concerned Municipality / Bidhannagar Municipal Corporation.

Selected candidates 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 post at office of the CMOH, North 24 Parganas.
2. This engagement is purely on contract basis and will automatically be terminated after expiry of 31.03.2018.
3. The period of contract may be extended further on basis of satisfactory performance.
4. The service may also be terminated by one month's notice from either side.
5. Payment of remuneration will be made from NUHM Fund.
6. The candidates are directed to report for joining to the stated post at the office of the Chief medical Officer of Health, North 24 Parganas, within 10(Ten) days from the date of issuance of this order, along-with their **Photo identity proof (PAN Card/Voter ID/Aadhar Card, any one) and Medical Fitness certificate** (Medical certificate format of WBSH&FW attached herewith) issued by the registered M.B.B.S practitioner.
7. Any candidate failing to report to office of the undersigned within stipulated period, may not be allowed to join later and his/her engagement order stands cancelled after that period.
8. No T.A/D.A is admissible for joining.


Secretary,
District Health & Family Welfare Samiti
& Chief Medical Officer of Health,
North 24 Parganas

P.T.O.



Copy forwarded for necessary information to:

- 1) The Hon'ble Chairperson, DLSC, DH & FWS, North 24 Parganas
- 2) The Mission Director, NHM, Govt. of W.B., Swasthya Bhawan
- 3) The Addl. Mission Director, NHM, Govt. of W.B., Swasthya Bhawan
- 4) The Executive Director, SH & FWS, Govt. of W.B., Swasthya Bhawan
- 5) The District Magistrate, North 24 Parganas
- 6) The ADM(Health), North 24 Parganas
- 7) The Chief Medical Officer of Health, Basirhat Health District
- 8) The Commissioner of Bidhannagar Municipal Corporation, North 24 Parganas
- 9) The Chairpersons of all concerned Municipalities, North 24 Parganas
- 10) The Officer-in-charge(Health), O/o the DM, North 24 Parganas
- 11) The Nodal Officer-NUHM and DMCHO, North 24 Parganas
- 12) The Dy. CMOH- I/II/III /ZLO/DTO, North 24 Parganas & Basirhat Health District
- 13) The DPHNO, North 24 Parganas & Basirhat Health District
- 14) The ACMOH (all sub-divisions), North 24 Parganas & Basirhat Health District
- 15) The Executive Officer, Bidhannagar Municipal Corporation, North 24 Parganas
- 16) The District Informatics Officer, O/o the DM, North 24 Parganas, **with request to upload this ORDER in official website of North 24 Parganas District.**
- 17) The System Coordinator, Swasthya Bhawan, Govt. of W.B., **with request to upload this ORDER in official website of Health Department, W.B.**
- 18) The District Programme Co-ordinator, NHM, North 24 Parganas
- 19) The Nodal officer-NUHM of Bidhannagar Municipal Corporation/all concerned Municipalities, North 24 Parganas
- 20) The Health Officer of Bidhannagar Municipal Corporation/all concerned Municipalities, North 24 Parganas
- 21) The DPMU North 24 Parganas & Basirhat Health District
- 22) Enlisted candidates in "Annexure-1" are being informed accordingly
- 23) Guard File

Secretary,
District Health & Family Welfare Samiti
& Chief Medical Officer of Health,
North 24 Parganas

Annexure-I (3rd & final List)

Sl. No.	Appli. Code No.	Name of the Applicant	Father's Name / Husband's name / Guardian's name	Address	Place of posting	Caste
					(Name of the Municipality / Municipal Corporation)	
1.	LT0324	SK. ALIJAN MONDAL	SK. ENTAJ ALI MONDAL	Vill+P.O.-Patna,P.S.-Polba,Dist.-Hooghly. West Bengal-712148	Kamarhati Municipality	OBC-A
2.	LT0361	SAIKAT HAZRA	SUSANTA KUMAR HAZRA	VILL=GOBINDAPUR, P.O=GOTALAHAT- KRISHNAPUR, P.S=BISHNUPUR, DIST=SOUTH 24 PGS, STATE=W.B, PIN=743503	South DumDum	UR
3.	LT0199	PRASANTA PAL	SANAT KUMAR PAL	Vill-Tangramari, P.O.-Simulia Kalibari, P.S.-Hasnabad, Dist.-North 24 Parganas. West Bengal-743426	Basirhat	UR
4.	LT0168	MUSTAQUE AHMED	SAMSUZZONA SK	Vill-Maliadanga,P.O.-Bokhara,P.S.-Sagardihi, Dist.-Murshidabad. West Bengal-742226	Bidhannagar MC	UR
5.	LT0115	MD.ANISUZ ZAMAN	MD. MOKID ALI	Vill- Dugdia, P.O.+P.S.-Shason, Dist.-North 24 Parganas. West Bengal-743423	Madhyamgram	UR
6.	LT0112	SOUMEN KUMAR GHOSH	SAILENDRA NATH GHOSH	Vill+P.O.-Nehalpur, P.S.-Basirhat, Dist.-North 24 Parganas. West Bengal-743437	Basirhat	UR
7.	LT0387	SK MD BELAL	SK. BASARAT ALI	VILL=HATGACHA, P.O=BHATORA, P.S=JOYPUR, DIST=HOWRAH, STATE=W.B, PIN=711303	Bhatpara	UR
8.	LT0307	ANANTA NEOGI	LT. GOBINDA CHARAN NEOGI	Vill-Rameswar pur,P.O.-Ramjibanpur,P.S.-Chandrakona, Dist.-Paschim Medinipur. West Bengal-721242	Panihati	UR


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. 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