



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/NRHM/2013/260

Dated: 28<sup>th</sup> March 2013

### Advertisement Notification

Sub: Engagement of support staff for NRC

In pursuance of approval given the District Health & Family Welfare Samiti, North 24 Parganas, all interested and eligible female candidates (preference may be given to the candidates from Self Help Group (SHG), BPL and residing at local areas) are hereby requested to apply (as per prescribed format Vide Annexure-I) for the following categories of support staff of Nutrition Rehabilitation Centre (NRC) at Hatgachi PHC under Sandeshkhali-I Block, North 24 Parganas. Last date of submission of application is 12<sup>th</sup> April 2013. The application should be reached to the office of the undersigned within due date through registered post only. No application will be considered after due date. a

Sl. No.	Name of the Post	No. of Post	Reservation status	Honorarium / month
1.	Cook	1	Unreserved	5000/-
2.	Sahayika / Attendant	4	ST- 1 Gen- 2 SC- 1	3,500/-

#### Eligibility & Selection Criteria for the post of Cook Sahayika / Attendant:

Sl. No	Educational Qualification & other Criteria	Scoring for selection
1	HS = 10	Total Marks = 10 60% and more = 10 45% to less than 60% = 5 Less than 45% = 1
2	Madhyamik = 10	Total Marks = 10 70% and more = 10 50% to less than 70% = 5 40% to less than 50% = 2 Less than 40% = 1
3	Residence = 10	Within GP = 10 Within Block = 5 Sub-Division = 1
4	BPL = 5	If yes = 5
5	Self Help Group	If yes=5
6	Interview = 5	5

*[Signature]*  
Secretary  
District Health & Family Welfare Samiti &  
Chief Medical Officer of Health  
North 24 Parganas

Copy forwarded for information and necessary to:

1. The State Mission Director-NRHM, Department of Health & Family Welfare, Government of West Bengal
2. The Executive Director, WBSH&FWS, Department of Health & Family Welfare, Government of West Bengal
3. The District Magistrate, North 24 Parganas
4. The DIO-NIC, North 24 Parganas with the request to upload this notification in the official website of North 24 Parganas
5. The HR Cell, WBSH&FWS, Department of Health & Family Welfare, Government of West Bengal
6. The System Coordinator, IC Cell, WBSH&FWS, Department of Health & Family Welfare, Government of West Bengal with the request to upload this notification in the official website of Departments.
7. Guard file

*M. Anand*  
25/03/13

Secretary

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

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

APPLICATION FOR THE POST OF \_\_\_\_\_

1. Name of the candidate: \_\_\_\_\_

2. Father's Name: \_\_\_\_\_

3. Sex: \_\_\_\_\_

4. Date of birth: \_\_\_\_\_

5. Caste: (Gen/SC/ST/OBC): \_\_\_\_\_

6. Address:

Village: \_\_\_\_\_, GP \_\_\_\_\_

Block \_\_\_\_\_, Sub-Division: \_\_\_\_\_

P.S: \_\_\_\_\_, P.O: \_\_\_\_\_

PIN: \_\_\_\_\_

7. Educational Qualification:

Sl No.	Examination	Year of passing	Board	Total marks	Marks obtained	Percentage of marks
1	Madhyamik					
2	HS					

8. Whether Member of Self Heal Group Yes  or No.  (give  $\sqrt$  marks within box)

9. Whether BPL or not Yes  or No.  (give  $\sqrt$  marks within box)

10. List of enclosure submitted along with the application:

- a) Voter ID Card, b) Ration Card, c) Caste Certificate, d) BPL Certificate, e) Mark of sheet Education Qualification, f) Certificate of Membership of SHG

DECLARATION

I do here by declare that all the information furnished by me in the above application is true to the best of my knowledge and belief and in case, it is found to be incorrect at a latter stage, I shall be bound to accept any penal measures deemed appropriate by the authority.

Place:

Date:

\_\_\_\_\_  
Signature of the candidate