WEST BENGAL STATE HEALTH & FAMILY WELFARE SAMITI

Registration NO:S/IL/14448 of 2002-2003

Swasthya Bhawan, 'B' Wing,3rd Floor, GN-29, Sector-V, Salt Lake, Kolkata-700091 Tele Fax No:033-2357 7901/3636, e-mail-ed_samity@wbhealth.gov.in

Memo No: HHM/1H-105-2014/ ブ220

22/06/2016

NOTICE

[Refer Recruitment Notice No SHFWS/2016/77 Dated 19/01/2016 for the posts of State Consultant – Quality Assurance and Public Health in Quality Assurance Programme under National Health Mission]

The candidates, as per enclosed list, for the posts of State Consultant - Quality Assurance and State Consultant - Public Health in Quality Assurance Programme, are hereby requested to bring their original testimonials as listed below for verification at the 1st Floor, Conference, Swasthya Bhawan, Saltlake, Kolkata-700091 on 30th June, 2016 at 1 pm. It is also directed to submit the self attested photocopies of all those documents in the order listed below, mentioning his/ her online registration number and date in all the documents otherwise the application is liable to be cancelled. This is to further inform that candidates must be present at the time of verification and no third party will be allowed at the time of verification. No change of date and time will be entertained under any circumstances.

The candidates must bring undernoted documents for verification:

- Photo proof identity card (Passport or Voter ID Card or AADHAR Card or Pan Card).
- Proof of Address (Passport or Voter ID Card or AADHAR Card).
- Age Proof Certificate (Madhyamik or equivalent examination certificate)
- All the marksheets and certificates of educational qualification (graduation onwards) and professional qualification in original.
- Internship completion certificate. The certificate must be issued before 11.2.16, the last date of submission of on-line application.
- Registration Certificate from the concerned council (whichever applicable) obtained before 11.2.16, the last date of submission of on-line application.
- All the post qualification experience certificates issued and stamped by the appropriate authority starting from oldest to latest.
- Experience certificates must consist of Name of the post, Employer's Name, Employee's Name, Date of joining(DOJ) and Date of Leaving (DOL)/current date in case still continuing otherwise his/her experience will be treated as invalid. No offer of appointment lengagement will be treated as experience.
- In case of married female candidates Marriage registration certificate.
- Documents relating to Guardian's identity. (Guardian as mentioned in the online application).

Notes:

- 1. Verification of testimonials does not entitle the candidate to claim to appear in the further steps of the process of final selection.
- 2. After successful verification of testimonials, qualified candidates have to appear for the Written Test, Computer Test and Interview on 11th July,2016.
- 3. In case of failure to produce any of the above mentioned original documents at the time of verification, his/her application is liable to be cancelled.
- 4. The decision of the Competent Authority regarding the engagement is final.

Executive Director. WB SH & FW Samiti

List of candidates called for Original Testimonials Verification for the different posts for **Quality Assurance Programme**

Recruitment Notice No.: SHFWS/2016/77, dt: 19/01/2016

Date of verification : 30-June-2016

Venue of verification: 1st Floor, Conference Hall, Wing-A, Swasthya Bhawan

1. State Consultant - Quality Assurance

1. State Consultant Quanty						App id	Time	ı	
Ī	App id	Time	App id	Time		Time	X		
ł	52929	1:00 PM		1:00 PM	52961	1:00 PM	X	1:00 PM	
	52941	1:00 PM	52945	1:00 PM	52968	1:00 PM	X	X]

2. State Consultant - Public Health

Z. State Consultation						See id	Time	
T	App id	Time	App id		App id	Time	4	
ł				1:00 PM	52956	1:00 PM	52967	1:00 PM
ł	52930	B	×	lR	×1	X		1:00 PM
1	52939	1:00 PM	52954	1:00 PM	52960	1:00 PM	32370	
ı	32333	1 1	×		××			

W.B.S.H. & F.W.S.