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: H/SFWB/7E-02-2011/7/146

Date: 27/05/2016

Notice for the post of Nutritionist for Nutritional Rehabilitation Centres of various districts

The candidates, as per enclosed list, for the post of **Nutritionist**, are hereby requested to bring their **original testimonials** as listed below for verification at the **2nd Floor Auditorium**, **Swasthya Bhawan**, **Sector-V**, **Saltlake**, **Kolkata -700091 on 10**th **June,2016 at 11.30 am.** It is also directed to submit the **self attested photocopies** of all those documents in the order listed below. 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 from this end.

The candidate must bring undernoted documents for verification:

- Photo proof identity card (Passport or Voter ID Card or ADHAR Card or Pan Card).
- Proof of Address (Passport or Voter ID Card or ADHAR Card or Ration Card).
- Age Proof Certificate (Madhyamik or equivalent examination certificate)
- Caste Category Certificate (if any). In case of OBC candidates' category 'A' or 'B'
 must be mentioned specifically in the caste certificate.
- Marksheets and Certificates of Graduation or Post Graduation or both.
- All the 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)or still working, otherwise her experience will be treated as invalid. No appointment letter will be treated as experience.
- In case of married candidates Marriage registration certificate.

All the valid candidates, after original testimonial verification, have to sit for a written examination on 17th June, 2016 at the 2nd Floor Conference Hall of the Institute of Health & Family Welfare. Candidates must bring their original photo ID proof (Pan card/ Voter Card/ Passport/ Aadhar Card) on that date to sit for the written examination.

Executive Director, WB SH & FW Samiti

List of candidates called for original testimonials verification for the post of <u>Nutritionist</u>

District: MALDA

Date of verification: 10th-June-2016 from 11:30 A.M.

Venue of verification: 2nd Floor, Auditorium Hall, Swasthya Bhawan

Sl. No.	Roll No.	Reg. No.	Name	Guardian's name	Caste	Date of Birth
1	03	Nutri/03	ARPITA DAS	BINOY KUMAR DAS	ОВС-В	15-05-1991
2	04	Nutri/04	INDRAKSHI MITRA	MANOJ KUMAR MITRA	Gen	02-12-1991
3	05	Nutri/05	ARPITA DAS	APURBA DAS	SC	18-08-1991
4	06	Nutri/06	ANUDITA CHAKRABORTY	PARTHA PRATIM CHAKRABORTY	Gen	24-08-1992
5	07	Nutri/07	SHATARUPA MUKHERJEE	DEBDAS MUKHERJEE	Gen	22-07-1987
6	08	Nutri/08	DIPANWITA DAS	PRODYUTMOY DAS	Gen	25-10-1992
7	09	Nutri/09	SHARMISTHA ROY	HIMADRI ROY	Gen	17-11-1990
8	10	Nutri/10	DEBASHREE PAYRA	GOUTAM PAYRA	Gen	01-01-1991
9	11	Nutri/11	RAHENA YASMIN	MOHIUUDIN SARKAR	Gen	18-01-1983
10	12	Nutri/12	ESHITA DEY	TRIPTI KUMAR DEY	Gen	30-07-1989
11	13	Nutri/13	MADHURIMA DAS	BASANTA DAS	Gen	15-10-1992
12	14	Nutri/14	ARNAJA MANDAL	UDAY CHAND MANDAL	Gen	25-02-1989
13	15	Nutri/15	PRITILATA MANDAL	BIBHU BILAS MANDAL	sc	09-05-1991
14	16	Nutri/16	NANDITA SARKAR	RABINDRANATH SARKAR	Gen	13-10-1990
15	17	Nutri/17	SIKTA CHANDA	BICKRAM SANNYASI	Gen	23-03-1984
16	18	Nutri/18	UMA PANI SHEET	RABINDRA NATH SHIT	sc	14-11-1982
17	19	Nutri/19	CHANDRIMA DAS	CHANCHAL DAS	Gen	09-03-1991
18	20	Nutri/20	SANCHITA CHAKRABARTY	SOURAV CHAKRABARTY	Gen	29-06-1990
19	21	Nutri/21	PAULAMI PARAI	PRASANTA KUMAR PARAI	Gen	10-03-1989
20	22	Nutri/22	MANDIRA DINDA	JADAB DINDA	Gen	02-08-1988

Executive Director W.B.S.H. & F.W.S.

List of candidates called for original testimonials verification for the post of <u>Nutritionist</u>

District: ALIPURDUAR

Date of verification:

10th-June-2016 from 11:30 A.M.

Venue of verification: 2nd Floor, Auditorium Hall, Swasthya Bhawan

SI No.	Name	Date of Birth
1	INDRANI CHAKRABORTY	31.10.1991
2	RENUKA SANPUI	12.05.1990
3	DEBANJALI JAIRAM	05.02.1990
4	RINITA DEBNATH	13.03.1988
5	SUPRITA BHOWMICK	26.03.1991
6	BAISAKHI KOTAL	10.05.1990
7	SUSMITA DAS	21.04.1991

Executive Director W.B.S.H. & F.W.S.

List of candidates called for original testimonials verification for the post of <u>Nutritionist</u>

District: WEST MEDINIPUR

Date of verification: 10th-June-2016 from 11:30 A.M.

Venue of verification: 2nd Floor, Auditorium Hall, Swasthya Bhawan

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SI.	Name	Guardian's name	Caste	Date of Birth				
1	ARATI HEMBRAM	PULIN HEMBRAM	ST	15-09-1994				
2	INDUMATI HANSDA (MANDI)	SANATAN HANSDA	ST	10-02-1980				
3	SANTI MANDI	RUBAN MANDI	ST	20-11-1985				

Executive Director W.B.S.H. & F.W.S.