

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

No: SHFWS/ESTD-868/2015/ 7364

Date: 08/08/2016

ORDER

In reference to the recruitment notice no SHFWS/2015/68, dated: 08/10/2015, the following candidates are hereby engaged as **"Public Health Manager" under NUHM** on contract basis with a consolidated monthly remuneration of ₹ 25,000/- (Rupees Twenty five thousand) only, at the **"Place of posting"** mentioned against their names.

Sl.	Name	Guardian's name	DOB	Caste	Address	Place of posting
1	Ms. FAHMIDA HOSSAIN	Mrs. KAMRUN NAHAR	31-05-1985	OBC-A	House No: 7, Street: Mistery Para Lane, Kolkata, Ward No. 54, State: West Bengal, PIN: 700014	Rajpur-Sonarpur Municipality
2	Mr. DEBASIS DE	Mr. TAPAN KUMAR DE	27-04-1983	OBC-B	Village: Nunnungeria, Block+Sub Division: Jhargram, Dist: Paschim Medinipur, State: West Bengal, PIN: 721507	Jhargram
3	Dr. ATANU MALLICK	Mr. BEJOY MALLICK	28-03-1983	UR	Village: Kajiberia, Block: Bagnan 1, Sub Division: Uluberia, Dist: Howrah, State: West Bengal, PIN: 711303	Uluberia
4	Mr. JOYDEEP GHOSH	Dr. JAGABANDHU GHOSH	08-09-1987	UR	House No: 369, Street: Purbachal Kalitala Main Road, Kolkata, State: West Bengal, PIN: 700078	North Dumdum
5	Dr. AMIT GHATI	Mr. BISWANATH GHATI	03-02-1983	SC	Village: Dhanyaghor, Block: Khanakul, Sub Division: Arambagh, Dist: Hooghly, State: West Bengal, PIN: 721212	Arambagh
6	Ms. CHANCHALA MONDAL	Mr. CHANDRAKANTA MONDAL	30-10-1977	SC	Village: Sheikh Para, Block: Raninagar- II, Sub Division: Domkal, Dist: Murshidabad, State: West Bengal, PIN: 742308	Barasat
7	Ms. JAYEETA SARKAR	Mr. AJAY SARKAR	06-01-1988	SC	C/O Ajay Sarkar, Street: Sridhor Banshidhor Road, Village: Santinagar, Dist: 24 Pgs (N), State: West Bengal, PIN: 700122	Barrackpur
8	Mr. SK JAMAL UDDIN KADRI	Mr. JEKER ALI SK	18-04-1989	OBC-A	Village: Ramdasapur, Block: Katwa-II, Sub Division: Katwa, Dist: Bardhaman, State: West Bengal, PIN: 713502	Burdwan
9	Dr. DIPTANGSHU GARAI	Mr. BIJOY KUMAR GARAI	20-03-1986	OBC-B	Street: Bhedia Station Road, Village: Bhedia, Block: Ausgram 2, Dist: Burdwan, State: West Bengal, PIN: 713126	Bolpur

The above mentioned candidates are hereby engaged as per the terms and condition mentioned below:

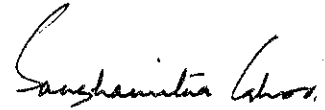
- 1) The order of engagement will take effect from the date he/she joins the post.
- 2) The period of contract will automatically be terminated after expiry of 31/03/2017.
- 3) If the incumbent proposes to cease his/her work without covering 1 month's notice period, his/her remuneration will be deducted accordingly.
- 4) The period of contract may be extended further on the basis of satisfactory performance.
- 5) The service may also be terminated by one month's notice from either side.
- 6) Payment of remuneration will be made from NUHM fund.
- 7) The candidates are directed to report for joining for the post to the CMOH of concerned district. The CMOH in turn will direct the selected Public Health Manager to report to the Executive Officer of the concerned municipality (place of posting) mentioned against their names with downloaded engagement order, photo identity proof and Medical Fitness Certificate (enclosed herewith) issued by the registered M.B.B.S. practitioners.
- 8) The candidates should join within 15 days from the date of issuance of this Order.
- 9) 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.
- 10) No T.A. / D.A. is admissible for joining.



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

Copy forwarded for information and necessary action to the:

- 1) DHS, Health & Family Welfare Dept., Swasthya Bhawan.
- 2) District Magistrate, _____ District.
- 3) AMD, NHM, Health & Family Welfare Dept., Swasthya Bhawan.
- 4) PO, NHM, Health & Family Welfare Dept. Swasthya Bhawan.
- 5) Sr. AO, NHM, Swasthya Bhawan.
- 6) NO, NUHM, Swasthya Bhawan.
- 7) CMOH, _____ District.
- 8) Executive Officer, _____ Municipality.
- 9) Director, SUDA.
- 10) Manager, HR Cell, GTZ Building, Swasthya Bhawan.



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

**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 :