

GOVERNMENT OF WEST BENGAL
OFFICE OF THE DISTRICT HEALTH & FAMILY WELFARE SAMITI
11, DR. P. K. BANERJEE ROAD, LICHUBAGAN, HOWRAH – 711101

No. DHFWS / HOW / 1422/17

Date: 09/6/17

Walk-in interview for the following Medical Officer positions on contractual basis in the District of Howrah District under different National Health Programmes will be conducted.

Post No.	Name of the post	Place of posting	No. of Post	Eligibility	Consolidated Remuneration per month
01	Medical Officer – Full Time (NUHM)	HMC (including Bally Sub-Unit)	18 (SC-4, ST-1, OBC-A -2, OBC-B-2, UR-9)	<ul style="list-style-type: none"> MBBS from a MCI recognized Institute with 1 year compulsory internship. Must be registered under West Bengal Medical Council Permanent resident of West Bengal. Age: 66 yrs or less as on 01.01.2017 	Rs.40,000/-
02	General Duty Medical Officer (NRHM)	Any upgraded BPHC/PHC (delivery point) in Howrah	02 (SC-1 & UR-1)	<ul style="list-style-type: none"> MBBS recognized by MCI Age: 65 yrs or less as on 01.01.2017 	Rs.40,000/-
03	Medical Officer (MO –DTC)	DTC- Howrah	01 (UR)	<ul style="list-style-type: none"> Essential Qualification/ Requirement: <ol style="list-style-type: none"> MBBS or equivalent degree from institution recognized by Medical council of India; Must have completed compulsory rotatory internship. Preferential Qualification: <ol style="list-style-type: none"> Diploma / MD Public Health/ Tuberculosis & Chest diseases One year experience in RNTCP Basic knowledge of computers Age: 66 yrs or less as on 01.01.2017 	Rs.40,000/-

Desiring Medical Officers may attend the walk-in interview on **21st June 2017 (Wednesday)** at **10:30AM** along-with the specific filled-in application format at the **Bungalow Office of the CMOH, 11, Dr. P. K. Banerjee Road, Lichubagan, Howrah-711102** (Near Mallikphatak, between Correctional Home (Jail) & BSNL Office. The candidate should be physically fit to attend daily duty. This is to further inform that candidates must be present at the time of walk-in interview along-with all required documents and no third party will be allowed at the time of interview. No change of date and time will be entertained from this end. No separate Admit Card for appearing in walk-in interview will be issued.

The candidates must bring the filled in **Application Format** is mentioned hereunder along-with all **original** documents for appearing in the walk-in interview:

- 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)
- Proof of Age (Madhyamik or equivalent examination certificate/Admit Card)
- All marksheets and pass certificates starting from Secondary onwards
- Proof of the Caste Certificate, if applicable.
- Proof of updated Registration Certificate of WBMC/MCI.
- 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 & Employee's Names, Date of Joining and Date of Leaving otherwise his/her experience will be treated as invalid. No appointment letter will be treated as experience certificate.

09.6.17

Chief Medical Officer of Health &
Member Secretary, DH&FWS, Howrah
Application Format

[illegible]

11. Employment Record:

(Total years of post qualification experience) :

12. Details of Employment: (Use separate sheets if required).

Starting with your present employment, list in reverse order all the employments you have had.

12 A. Current Employment:

Name of Employer:

From Month / Year	To Month / Year	<u>Designation</u>

Location of Employment:

Description of your duties:**12 B. Previous Employment:**

Name of Employer:

From Month / Year	To Month / Year	Designation

Location of Employment:

Description of your duties:**12 C. Previous Employment:**

Name of Employer:

From Month / Year	To Month / Year	Designation

Location of Employment:

Description of your duties:**13. For the post of : Medical Officer –****A. Whether 01 year internship done (Yes / No) ? _____****B. Whether Registered under West Bengal Medical Council (Yes / No) ? _____ Registration No. : _____****C. Whether Permanent Resident of west Bengal (Yes / No)? _____****Declaration**

I hereby solemnly declare that the information furnished above are based on material records and are true to the best of my knowledge and belief. If any information furnished or any part of it is found to be incorrect, then I do believe and understand that my candidature for contractual recruitment to the post I have applied for is liable to be cancelled without any further intimation to me.

Place :**Date :****Signature of the Applicant**