



GOVERNMENT OF WEST BENGAL  
OFFICE OF THE CHIEF MEDICAL OFFICER OF HEALTH  
MURSHIDABAD

P.O.- BERHAMPORE, PIN - 742101

Tel no 03482-257877

Email – cmohmurshidabad@gmail.com

Memo No. CM-MSD/DH&FWS/2021/9042

Dated. Berhampore the  
15-12-2021

**NOTIFICATION**

Applications are hereby invited from eligible candidates for engagement to different vacant posts in the District of Murshidabad only, under National Health Mission, on purely contractual engagement basis.

The details of posts for which applications are sought is given in Annexure A.

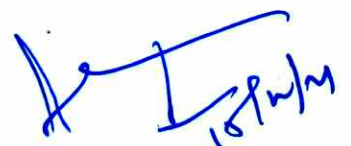
**General instructions for application to all posts-**

1. The Contract period will initially be of 1 (one) year from the date of joining of the selected candidate and will be renewed at the discretion of the Competent Authority. Remuneration will be monthly consolidated as per approval of State NHM for the specific post.
2. The Essential Qualification/s mentioned in each category should be of full time Regular courses only and should be recognized by State/Central Government/UGC/AICTE (University incorporated by an Act of the Central or State Legislature in India or other Educational Institutions established by an Act of Parliament or declared to be deemed as Universities under Section 3 of the University Grants Commission Act, 1956). Full Time Course means where a student has attended class room sessions full time throughout the course. In case of any dispute regarding admissibility of any particular qualification, the decision of Secretary, *District Health & Family Welfare Samity*, Murshidabad shall be final and binding.
3. Candidates possessing Essential Qualification against each post in Part Time / Correspondence/ Distance Education/E-learning mode are **not** eligible to apply.
4. Only Indian Nationals are eligible to apply.

5. One candidate can apply for multiple posts, and for each application separate application fees are to be submitted, failing which applications without requisite application fees will be summarily rejected.
6. Candidates who are already employed under Central/State Govt./PSUs/ Autonomous Bodies/Other Divisions of NHM will have to provide a "No Objection Certificate" from the employer concerned, at the time of submission of application
7. In respect of current employment, experience certificate/ joining letter along with last months' salary slips, or, Form 16 and other documents which clearly prove continuity in the job are to be attached. In case claim is not established from the proofs submitted, application is liable to be rejected.
8. It is for the candidate to ensure that he/she fulfils the eligibility criteria and complies with the requirements adhered to the instructions contained in this advertisement as well as in the application form. Candidates are, therefore, requested to read the advertisement carefully and complete the application form and submit the same as per instructions given in this regard.
9. No interim correspondence will be entertained.
10. *District Health & Family Welfare Samity*, Murshidabad will not be responsible for any kind of expenditure borne by the candidates appearing for the selection tests or interview.
11. Engagement of selected candidates is subject to verification of Educational / Technical Qualifications, Memberships, Experiences, Pay Particulars (CTC /Last Pay Certificate), Caste and Character & Antecedents as the case may be with the Concerned Authorities, as per the existing Rules.
12. Panel for all posts will be valid for next one year from the date of final selection, and may be extended as per discretion of selection committee.
13. *District Health & Family Welfare Samity*, Murshidabad reserves the right to fill or not to fill the posts and mere fulfilment of qualifications and other requirements laid down does not entitle a candidate to be called for Selection tests/Interview.

**Documents required:**

1. Duly filled in application format (format given in Annexure B)- the application form will have to be either handwritten clearly or be neatly typed keeping the same format
2. One recent passport size photograph (showing clearly the face of the applicant) to be affixed in the application format, duly signed by the candidate. Photograph must be

  
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latest photograph, should be on white background. Photograph should have 80% face coverage, and should not be taken with cap or goggles.

3. Self-Attested copies of the following documents / certificates are to be enclosed with the application:
- Birth Certificate/Admit Card or Certificate of Madhyamik or equivalent examination mentioning date of Birth.
  - Caste Certificate issued from the concerned authority (In Case of SC/ST/OBC A/OBC B), if applicable.
  - Certificate for Disability from the Appropriate Authority, if applicable.
  - Mark sheet & Certificates of Madhyamik or equivalent examination), Higher Secondary or equivalent examination, Graduation, MBBS or equivalent, Post Graduation & Technical qualification issued from the appropriate authority.
  - Self - attested documentary proof of experience (where ever applicable) – The Experience Certificate must clearly mention years, months and days of experience. Non-receipt of Proof of Experience within the stipulated date will be treated as incomplete application and will be summarily rejected without assigning any reasons thereof and no correspondence in this regard will be entertained.
  - Proof of Identity & Address (Passport, Voter ID, Driving License, Aadhaar Card etc).
  - No objection certificate as stated in General Instructions above, if applicable.
  - Any other document in support of candidature.

**Submission of application –**

- Application form (as per format given in Annexure B) duly filled in along with all relevant documents are to be submitted in a sealed envelope. The envelope should be superscripted with “Application for the post of .....
- Photocopy of all supportive documents should be clearly visible & self-attested
- For application to each post, a Demand Draft of Rs.100/- (Rupees One Hundred only) for General Category & Rs.50/- (Rupees Fifty only) for SC, ST, OBC & other reserved categories will have to be submitted. The demand draft is non-refundable and will have to be drawn in favour of **The Secretary, District Health & Family Welfare Samity Murshidabad, payable at Berhampore, Murshidabad**
- Incomplete Applications will be summarily rejected without assigning any reasons thereof and no correspondence in this regard will be entertained.**

  
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5. Application form duly filled in along with all relevant documents and Demand draft are to be submitted to-

**Secretary, District Health & Family Welfare Samity**  
**Office of the Chief Medical Officer of Health, Murshidabad**  
**14, Cantonment Road, PO- Berhampore,**  
**District- Murshidabad,**  
**Pin- 742101**

6. Applications are to be either submitted by hand at the above mentioned address or by post/ speed post/ courier.
7. Applications received after the last date of receipt of Application Form and documents shall be rejected. *District Health & Family Welfare Samity*, Murshidabad does not bear any responsibility for any delay in post/courier for any reason whatsoever.
8. Recruitment related information will be made available from time to time only at [www.murshidabad.nic.in](http://www.murshidabad.nic.in) / [www.wbhealth.gov.in](http://www.wbhealth.gov.in).
9. Last date of submission of application is **28/12/2022 within 5:00 PM**.
10. **Date of Interview on 29/12/2021 from 11 AM to 1 PM at Office of the CMOH, PO-Berhampore, Dist. Murshidabad, PIN-742101.**

**Member Secretary, DH&FWS,  
Murshidabad**

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## Annexure A

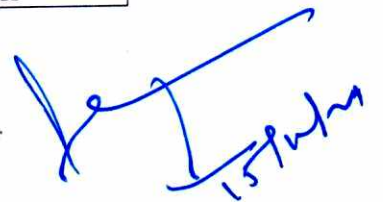
1. Name of the Post : **Medical Officer (NRHM)**

Number of vacancy	41 (Unreserved)
Essential Qualification	MBBS*from MCI recognized Institute with one year compulsory Internship, must be recognized under West Bengal Medical Council. Weightage will be given for higher Qualification
Upper age limit	62 years
Remuneration	Rs. 60,000/- ( Rupees Sixty thousand only) per month

  
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**Medical Officer (MBBS) Vacancy**

Sl No.	Name of the BPHC/ PHC	Block
1	Gokarna BPHC	Kandi
2	Nasipur BPHC	Bhagawangola-II
3	Bharatpur BPHC	Bharatpur-I
4	Hariharpara BPHC	Hariharpara
5	Kanapukur BPHC	Bhagawangola-I
6	Teghari BPHC	Raghunathganj-II
7	Rajnar BPHC	Raghunathganj-I
8	Ahira BPHC	Suti-I
9	Mahisail BPHC	Suti-II
10	Barala PHC	Raghunathganj-I
11	Purandarpur PHC	Kandi
12	Uttar Mahammadpur PHC	Samsherganj
13	Jajan PHC	Bharatpur-I
14	Talipur PHC	Bharatpur-I
15	Katlamari PHC	Raninagar-II
16	Panchthupi PHC	Burwan
17	Chaitannyapur PHC	Beldanga-I
18	Habaspur PHC	Bhagawangola-I
19	Patikabari PHC	Nowda
20	Jitpur PHC	Domkal
21	Hatinagar PHC	Berhampore
22	Sagarpara PHC	Jalangi
23	Lalkuthi PHC	Murshidabad-Jiaganj
24	Panchgram PHC	Nabagram
25	Krishnapur Dinupara PHC	Lalgola
26	Herampur PHC	Raninagar-I
27	Monigram PHC	Sagardighi
28	Beniagram PHC	Farakka
29	Bahutali PHC	Suti-I
30	Mohammadpur PHC	Raghunathganj-II
31	Arjunpur PHC	Faraka
32	S.Gouripur PHC	Sagardighi
33	Chowan PHC	Hariharpara
34	Hilora PHC	Suti-I
35	Bagdanga PHC	Domkal
36	Arjunpur PHC	Faraka
37	Oper Orahar PHC	Bhagawangola-I
38	Tenya PHC	Bharatpur-II
39	Aurangabad PHC	Suti-II
40	Ramnagar Bachra (Chandanpur) PHC	Beldanga-II
41	Kolanradhakanta pur PHC	Bhagawangola-II

  
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**Annexure: B**  
**APPLICATION FORMAT**

Paste one  
recent colour  
photograph  
duly signed  
on the  
photograph

**Application for the Post of**

“.....”

**Application against Advertisement No.....Date.....**

1. Name of the Applicant (in Block letters)

2. Mother's name in full

3. Guardian's Name

4. Present address-

Village/ Ward-

Flat No/ Block-

Road/Street-

Post Office-

PS-

Sub Division-

District-

PIN CODE

5. Permanent address-

Village/ Ward-

Flat No/ Block-

Road/Street/Sector-

Post Office-

PS-

Sub Division-


District-

PINCODE

6. Date of Birth

7. Age as on 1<sup>st</sup> January 2022-

8. Sex- Male/Female/Other

  
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9. Caste status- General / SC / ST / OBC-A / OBC-B (Strike out which ever is not applicable)

10. Contact no.

Mobile number

E mail ID number –

11. Educational Qualifications

Sl. No.	Educational Qualification	Year of Passing	Total Marks	Marks Obtained	% of Marks
A	Madhyamik or equivalent				
B	Higher Secondary or equivalent				
C	Graduation (BA/B. Sc/B. Com/BCA/Others)				
D	Post Graduation (MA/M. Sc/M. Com/MCA/Others)				
E	MBBS				
F	MD/MS/Diploma				
G	Computer Degree / Diploma				
H	Diploma in Medical Laboratory Technician (DMLT/BMLT) Bachelor's degree in Medical Laboratory Technician (BMLT)				
I	Other (if any)				

12. Demand Draft number –

Drawn on which Bank

Draft amount

Date of issue of Demand Draft

13. Year of experience (Years, Months and days) Mention details

14. Driving license number (Where applicable) and issuing authority

All the above information are to be mandatorily filled up by candidate.





**Declaration:**

I do hereby declare that particulars furnished above are correct to the best of my knowledge. I must produce all relevant documents (Original or Photocopies attested by the self-attestation only), whenever needed by the Authority. In case, in any time, if any of the above information / particulars are found to be incorrect, my candidature will be liable to be cancelled by the Authority and I shall be penalized for such action.

Attachment (Please✓)

01. Birth Certificate/Admit Card or Certificate.
02. Caste Certificate.
03. Certificate of Exempted Category.
04. Mark sheet & Certificates of Secondary.
05. Mark sheet & Certificates of Higher Secondary
06. Mark sheet & Certificates of Graduation
07. Mark sheet & Certificates of Post Graduation
08. Mark sheet & Certificates of Technical knowledge
09. Mark sheet & Certificates of MBBS
10. Experience Certificate.
11. Demand Draft.
12. Driving Licence.

\_\_\_\_\_  
**Signature of the candidate in full**

\_\_\_\_\_  
**(NAME IN BLOCK LETTERS)**

**Date –**

**Place-**

