

OFFICE OF THE SECRETARY DISTRICT HEALTH & FAMILY WELFARE SAMITI, M A L D A
P.O. Jhaljhalia (J.R.C), District-Malda, Pin-732102, e-mail : cmoh_mld@wbhealth.gov.in, Phone : 03512-264070, Fax : 03512-264070

No. DH&FWS/ 2107

Date: 20/12/2021


RECRUITMENT NOTICE

District Health & Family Welfare Samiti, Malda will engage purely on contract basis for the following posts :

WALK-IN-INTERVIEW ON 30.12.2021

Sl No	Name of the Post	No of Post	Place of Posting	Educational Qualification	Period of Engagement (Renewable one year at a time subject to satisfactory performance)	Age (As on 01.12.2021)	Remuneration (Consolidated) Rs.
A	Medical Officer Full Time (NUHM)	05 (UR-2,OBC-A-01, OBC-A-0B, ST-01, SC-01)	At English Bazar & Old Malda Municipality	Essential Qualification MBBS from a MCI recognized Institution with 1 year compulsory Internship and must be registered under West Bengal Medical Council. Weightage will be given for higher Qualification. The applicants should be permanent resident of West Bengal. Basic knowledge of computer	Upto 31.03.2022	Below 63 years	Rs. 60,000/- Per Month
B	General Duty Medical Officer (GDMO) under NHM	14 (UR-07, SC-04, ST-01, OBC-A-01, OBC-B-01)	Any block in Malda district	Essential Qualification MBBS or equivalent degree from institution recognized by MCI and must have completed compulsory rotatory internship. Desirable : • 1 year house staff ship or equivalent • Basic knowledge of computer	Upto 31.03.2022	Below 65 years	Rs. 60,000/- Per Month

Reporting time 10.00 am to 11.30 am


 Secretary, District Health & Family Welfare Samity
 & Chief Medical Officer of Health, Malda
 District Health & Family Welfare Samity
 Chief Medical Officer of Health
 MALDA

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Memo No: - DH & FWS/2107/1(11)

Dated: 20/12/2021

Copy forwarded for information and necessary action to:-

1. Dr. Moazzem Hossain, Chairman, Recruitment Committee, Malda
2. The District Magistrate, Malda
3. The Addl. District Magistrate(G), Malda
4. The Addl. District Magistrate(ZP), Malda
5. The Chairman, Englishbazar /Old Malda Municipality, Malda with request to display in the notice board.
6. The MSVP, Malda MMC&H, Malda
7. The Dy. CMOH-I, II, III, DMCHO, DTO, DPHNO, ACMOH (M&A), Malda
8. The District Informatics Officer(NIC), Malda, District Collectorate Building, Malda with request to publish the recruitment notice in www.malda.gov.in
9. The System Co-ordinator, IT Cell, Swasthya Bhawan, Kolkata with request to publish the recruitment notice in www.wbhealth.gov.in
10. The HR Cell, Swasthya Bhawan, Kolkata
11. The HC, CMOH Office Malda with request to make arrangement of recruitment process.
12. The DPC-in-charge, DAM, DSM, DPMU, Malda with request to co-operate.

Prayati 20/12/21
Secretary District Health & Family Welfare Samity
& Chief Medical Officer of Health, Malda

Member Secretary
District Health & F.W. Samity
&
Chief Medical Officer of Health
MALDA

General Information & instructions for Applicants

1. Application with application fee of Rs. 100.00 (Rs. 50/- for reserved categories) by NEFT or online transfer in favour of **District Health & Family Welfare Samity, Malda (Main A/c)**, Bank Name : **Punjab National Bank, Malda, Account No.0233010367893**, IFCS Code. **PUNB0023320** & **received copy** should be submitted in prescribed format for all posts. **Walk-in-Interview will be held at the Office of the Office of the Secretary, District Health & Family Welfare Samity & Chief Medical Officer of Health, Malda, P.O:- Jhaljhalia (J.R.C.), Dist:- Malda, Pin- 732102 on 30.12.2021 reporting time 10.00 am to 11.30 am.** Applicants may collect the application format from the Notice Board of the Office of the CMOH, Malda or download the same from the website i.e. www.malda.gov.in / www.wbhealth.gov.in
2. **Following documents (self attested) have to enclose with the application format and originals must be available as when required.**
 - i. Mark Sheet & Certificate of all Examination passed
 - ii. Admit Card (Madhyamik or equivalent) for age proof
 - iii. Caste Certificate (where applicable)
 - iv. Registration Certificate of Medical Council (For Medical Officer)
 - v. Computer qualification certificate (where applicable)
 - vi. Working experience certificate (if any)
 - vii. Technical knowledge certificate (if any)
 - viii. Residential Proof – Voter ID Card/ Ration Card/ Adhaar Card/ Passport/ Certificate from competent authority etc.
 - ix. ID Proof - Voter ID Card/ Ration Card/ Adhaar Card/ Passport etc
3. A panel of the suitable candidates will be prepared for each category of posts & remain valid for 1 year from publication of result.
4. The candidature of the applicant shall be cancelled at any stage of recruitment if the supportive certificate and information given in application is found false and incomplete application will be rejected.
5. District Health and Family Welfare Samity reserves the right to cancel the recruitment process at any stage without assigning any reason thereof. The decisions of the selection committee in any case should be considered final.
6. The name of the post should be mentioned in block letter on the top of the envelope.
7. Canvassing in any form will be considered as disqualification.

Dayan 20/12/21
Secretary, District Health & Family Welfare Samity
& Chief Medical Officer of Health, Malda

District Health & Family
Chief Medical Officer of Health
MALDA

APPLICATION FORMAT

(To be filled up by the candidates own hand writing)

*Affix Recent
Passport size
photograph duly
attested on photo by
the applicant*

To
The Secretary, DH & FW Samity
& CMOH, Malda

Application for the post of _____

Name of the applicant (in BLOCK letters) : _____

Father's/ Husband's/ Guardian's Name : _____

Full Address for correspondence : _____

Dist. _____ Pin _____

Present Address : _____

Dist. _____ Pin _____

Contact Number: _____ Nationality _____

Email ID (mandatory) : _____

Date of Birth : _____ dd _____ mm _____ yyyy Sex _____

Age as on 01.12.2021 _____ days _____ months _____ years.

Caste Status: _____ Marital Status _____

Educational Qualification (Self Attested copy must be submitted with the application) :

Sl. No.	Exam. Passed (Strike out which is not applicable)	Year of passing	Board / Council / University	Total Marks	Marks Obtained	% Marks	Division
a.	Madhyamik						
b.	Higher Secondary						
c.	Graduation (BA / B.Com. / B.Sc./BCA)						
d.	MBBS						
e.	Post Graduation						

Details of Technical Qualification (Self Attested copy must be submitted with the application):

Sl. No.	Exam. Passed	Year of passing	Board / Council / Institution/ University	Total Marks	Marks Obtained	% Marks	Division/ Result

Details of Working Experience (Attested copy must be submitted with the application) :

Sl. No.	Name of the Organization / Institution	Key task assigned	Period		Year of experience
			From	To	
Total Year of Experience :					

I hereby declare that all the statements made by me in the application are true and complete to the best of my knowledge and belief. I also understand that in case any of my statement is found false or incorrect during any stage of recruitment thereafter it shall disqualify me for the post applied for and/or I shall be liable for any other action that may be taken under the extant rules.

Date : _____

Signature of the Applicant

Place : _____