

District Health & Family Welfare Samiti

Paschim Medinipore District

Registration number S/1L/11,111 of 2002-2003

Zilla Swasthya Bhawan, Saratpally, Midnapur-721101

Memo No. DH&FWS/ 2022/2085

Date: 03.08.2022

WALK-IN-INTERVIEW

FOR ENGAGEMENT OF Specialist Medical Officer under 15th Finance Commission
Under DH&FWS, PASCHIM MEDINIPUR DISTRICT ON CONTRACTUAL BASIS

Sl. No. 01

SI. No	Name of the post	No. of Post	Eligibility	Age as on 01.01.202	Remuneratio n	Place of Posting
1	Specialist Medical Officer (Medicine)	03 [UR - 2, SC- 1]	Essential Criteria: 1. MBBS degree from the institution recognised Medical Council of India/National Medical Commission. 2. Post Graduate degree / diploma in medicine. 3. Must have completed compulsory one year internship	Upto 62 years	Rs. 3000/day thrice a week (on part time basis)	Any Urban Polyclinic
2	Specialist Medical Officer (Paediatrics)	03 [UR -2,SC- 1]	Essential Criteria: 1. MBBS degree from the institution recognised Medical Council of India/ National Medical Commission. 2. Post Graduate degree / diploma in Paediatric medicine. 3. Must have completed compulsory one year internship	Upto 62 years	Rs. 3000/day thrice a week (on part time basis).	Any Urban Polyclinic
3	Specialist Medical Officer (G & O)	03 [UR -2,SC- 1]	Essential Criteria: 1. MBBS degree from the institution recognised Medical Council of India/ National Medical Commission. 2. Post Graduate degree / diploma in G & O. 3. Must have completed compulsory one year internship	Upto 62 years	Rs. 3000/day thrice a week (on part time basis).	Any Urban Polyclinic
4	Specialist Medical Officer (Ophthalmol ogist)	03 [UR -2,SC- 1]	Essential Criteria: 1. MBBS degree from the instituition recognised Medical Council of India/ National Medical Commission. 2. Post Graduate degree / diploma in Ophthalmology. 3. Must have completed compulsory one year internship	Upto 62 years	Rs. 3000/day twice a week (on part time basis).	Any Urban Polyclinic

VENUE:

CMOH office, Zilla Swasthya Bhawan, Saratpally, MIDNAPUR TOWN,

PASCHIM MEDINIPUR

DATE:

23/08/2022

Reporting Time:

11. AM

GENERAL INFORMATION AND INSTRUCTIONS FOR CANDIDATES

The appointment would be a purely contractual basis and renewable at the end of the term subject to satisfactory performance.

At the time of joining, the candidate will have to execute an Agreement as per prescribed proforma with the undersigned.

3. The contractual engagement will be terminable from either side with one month's notice.

4. All candidates should be registered as medical practitioner with the West Bengal Medical Council /Medical Council of India.

5. Application fee Rs.100/- for General Caste & Rs.50 for reserved category (SC/ ST/ OBC/ PH) have to be deposited / Bank Transfer / UPI Payment only to the Account of District Health & Family Welfare Samiti, Paschim Medinipur, A/C No . 0788010159603 IFSC Code PUNB0078820 Bank - PNB, Branch Sepai Bazar (Paschim Medinipur). The amount is non-refundable. A ban. transfer copy should be attached with the printed application form at the time of original verification of documents otherwise the application will be treated as cancelled.

6. The prescribed essential qualifications are the minimum and more possession of the same years the

candidate to apply, but not for selection.

7. The applications must report for walk-in interview specified venue at least 30 minutes between the second secon time as per schedule mentioned below along with the application format (which will be attacr this notice) and original testimonials & Xerox with self attested.

8. The information provided in the proforma must be supported by collaborative documents which

must be produced for verification on the interview day

Selected candidates will be empanelled and engaged as per demand

10. Selected Doctors would have to stay at their respective places of postings. This provision is mandatory.

11. No T.A./D.A. will be paid to the candidates

12. Authority reserves the right to cancel all or any application without assigning any reason.

13. Any corrigendum or addendum notice, date, time venue of interview, short listing of candidate any other notice in this regard will be published in the following website. http://www.wbhealth.gov.in/Recruitment. / www.paschimmedinipur.gov.in YPT.

Details to be had from the office of the CMOH, Paschim Medinipur, Zilla Swasthya Bhawan, Midna Paschim Medinipur on any working day from 11-30 A.M. to 4-30 P.M.

> CMOH & Member Secretary DH&FWS, Paschim Medinipur

Memo No. DH&FWS-Mid(W)/2022/ 208511(15)

Date: 03, 68, 2022

Copy forwarded for information to:-

- 1. The Chairperson of the DLSC, Paschim Medinipur
- 2. The Mission Director, NHM & Secretary to the Govt. of West Bengal, Swasthya Bhawan, Kolkata 91
- 3. The Executive Director, WBSHFWS, Swasthya Bhawan, Kolkata 91
- 4. The Director of Health Services, Govt. of West Bengal, Swasthya Bhawan, Kolkata 91
- 5. The Addl. Mission Director, NHM & Joint Secretary to the Govt. of West Bengal, Swasthya Bhawan, Kolkata 91
- 6. The District Magistrate, Paschim Medinipur
- 7. The Programme Officer, NHM & Dy. Secretary to the Govt. of West Bengal, Swasthya Bhawan, Kolkata
- 8. The Addl. District Magistrate (ZP), Paschim Medinipur
- 9. The OC (Health), Paschim Medinipur
- 10. The Dy.CMOH-I/II/III/DMCHO/ZLO/DTO/DPHNO, Paschim Medinipur
- 11. The ACMOH, Sadar / Kharagpur/ Ghatal
- 12. The HR Cell, State Health & Family Welfare Samiti, Swasthya Bhawan, Kolkata 91
- 13. The DIO, NIC with request to publish advertisement in the official webpage of Paschim Medinipur
- 14. The IT Specialist, Dept. of Health & Family Welfare, Swasthya Bhawan, Kolkata 91 he is requested to publish this advertisement in the wbhealth.gov.in website

15. The DPMU Section for overall management of recruitment process.

DH&FWS, Paschim Medinipur

FORMAT OF APPLICATION

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	Name:							
2.	Permanent Ad	dress with Mob. No). :-					
3.	Communication	on Address with Mo	b. No. :-	× .				
4.	Date of Birth:							
5.	Age as on 0 1/	01/2022:						
6.	Sex(Male/Fem	رمام)،						
0.	Sex(water) em	iaic).	٠					
7.	Category :SC/S	T/OBC/Physically H	andicapped/Genera	1:		•		
8.		umber/Name of the	••					
0.	registration iv	unioci/ivanic of the	ar .					
9.	Details of prese	ent employment and	designation (if any	y):				
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	Academic Reco		I 0/ -6 - 1	T	· ·			
IN	lame	University/Board	% of marks obtained (as the	Academic Distinction,	Chance taken to pass	Year of pasi		
			case may be)	Honours, Medals,				
11	* MBBS			certificate				
	' MBBS							
3'	^d MBBS							
	ost Graduate egree/diploma							
	ny other							
	alifications							
11.	Details of past em	ployments and experi	ences (should includ	e the name of emplo	oyer, place of employme	nt tenure and		

nature of job).

12. Any other relevant information or extracurricular activities.

Signature of the Applicant

Date & Place