

GOVERNMENT OF WEST BENGAL
Office of the Chief Medical Officer of Health &
District Health & Family Welfare Samiti, Purulia
(Zilla Swasthya Bhavan, Ranchi Road, Puurlia) e-mail:

cmoh_pur@rediffmail.com :: cmohpur@gmail.com Tele Fax No: 03252-222417

Memo No: 1569

Dated: 22.05.2018

District Health & Welfare Samiti, Purulia will engage different categories of staff under various programs under Dist Health & Family Welfare Samiti, Purulia on purely contractual basis. .

Applications are invited by the under signed in prescribed application format attached with C.V. from the eligible candidates for engagement in the contractual posts as follows: **A) Counsellor (Thalasemia Unit), B) Dist. ICTC Supervisor, C) Dist. Assistant- (M&E) (DAPCU)**

Sl. No.	Name of the Post	No. of Post Category wise	Qualification	Age as on (01-06-18)	Remuneration (Consolidated Per Month)
a)	Counsellor under Thalasmaemia Control Programme	1 (UR)	<ul style="list-style-type: none"> • Eligibility Criteria • MA / M. Sc. In Sociology / Applied Psychology Desirable :- * Experience in working with Thalasmaemia patient and their families. * Computer Knowledge :- Minimum 6 (Six) Months Certificate Course in Computer Application 	20 Yrs to 40	Rs. 16,860/-
b)	Dist ICTC Supervisor	01(UR)	<ul style="list-style-type: none"> • PG Degree/Diploma in Psychology/Social Work/Sociology/Anthropology/Human Development • Certificate Course in Computer(Minimum six months) • Permanent Two Wheeler Driving License <p>Experience :- At least 3 years experience of Counselor in ICTC/PPTCT/STI/ART Centre under the National AIDS Control Programme</p>	Min-20 Yrs. Max-40 Yrs	16200/-
c)	Dist Assistant- (M&E) (DAPCU)	01(UR)	<ul style="list-style-type: none"> • Graduate from any discipline Diploma Course in Computer(Minimum one year) <p>Experience :- Minimum 2 yrs experience in handling data preferably in National Aids Control Programme</p>	Min-20 Yrs. Max-40 Yrs	12700/-

Age may be relaxed for the candidates belonging to SC/ST/OBC Category as per Govt. norms.

Last date of submission of application at Office of **The CMOH & Secretary, DH&FWS, Ranchi Road, Purulia** is **08.06.2018 through Registered Post / Speed Post / Courier**. Application will not be received by hand in the Office. Envelope should be superscribed "APPLICATION FOR THE POST OF _____ UNDER _____ PROGRAMME".

Demand Draft (DD) :- An amount of Rs. 100.00 only for UR Categories and Rs. 50.00 only for the Reserved categories through Demand Draft (DD) issued from any Nationalized Bank in favour of "District Health & Family Welfare Samity, Purulia" payable at Service Branch, Purulia must be submitted along with the application. Demand Draft (DD) is subject to non-refundable.

22.5.18
Chief Medical Officer of Health &
Secretary, DH&FWS,
Purulia. Samiti, Purulia

APPLICATION FORMAT

To
The Secretary
District Health & Family welfare Samity &
Chief Medical Officer of Health,
Purulia

Application Number:-

Space use for office use only

Sub – Application for the post of _____

Space for pasting
recent passport size
colour photograph of
the candidate with
his/her full signature
thereon

1. Name in Full (in BLOCK Letter) - _____
2. Sex (Put a tick) :- Male Female
3. Father's / Mother's Name :- _____
4. Date of Birth :- _____ / _____ / _____ (DD/MM/YYYY)
5. Age (as on date of Advertisement) :- _____
6. Nationality :- _____
7. Caste (SC/ST/OBC-A/OBC-B/UR) :- _____
8. Address communication

9. Permanent Address :-

10. Contact Number – Landline (With STD Code) _____ / Mobile _____

11. Essential Qualification :-

Qualification	Year of Passing	Subject (s)	University / Board / Institute	Total marks	Marks Obtained	Percentage of Marks Obtained

12. Desirable Qualification :-

13. Computer :-

14. List of Self attested Photocopies – Documents enclosed (NO other document except mentioned below is required (Put Tick Mark in the box) :-

Sl. No.	Document	Yes	No	Sl. No.	Document	Yes	No
01	One Color Passport size Photograph			02	Voter ID Card/ Aadhar card for verification of Identity		
03	Ration card/ electricity Bill for verification of residential proof			04	Mark sheets & certificates of educational qualification as per eligibility criteria		
05	Mark sheets & certificates of computer knowledge			06	Driving License		
07	Certificate of experiences duly issued by the appropriate authority			08	Caste certificate, where applicable		

N.B.:-

- 1) Application received after the closing date will not be considered.
- 2) Any attempt to unduly influence the selection process will lead to automatic disqualification of the applicant.
- 3) Only Short listed candidates will be called for Written Test, Computer Test & Interview.
- 4) The decision of the Competent Authority regarding the recruitment is final.

Declaration:

I solemnly declare that all statements made in this application are true, complete and correct. Original documents will be produced on demand. I understand that the concerned authority reserve the right to reject my candidature upon short listing of the candidates based on qualifications and experiences.

Place _____

Date _____

Signature of the Candidate in Full