



Government of West Bengal
Office of the Chief Medical Officer of Health Alipurduar
& District Health & Family Welfare Samiti, Alipurduar

Registration No: S/M/2347 of 2015-16

Matrisadan Building, 1st Floor, New Alipurduar, Ward No-XVI, Dist-Alipurduar, Pin: 736121

Tele: 03564-257200, email: cmohapd@gmail.com

Memo.CMOH/APD/No. 3465

Date: 12/11/2021

RECRUITMENT NOTICE

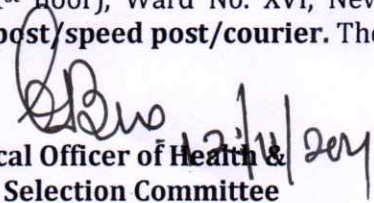
Application are invited for engagement on contractual basis of 02 (two) Co-ordinator and 02 (two) Data Entry Operator for Alipurduar District Hospital and Integrated AYUSH Hospital, Tapsikhata under CMOH, Alipurduar. The remuneration (consolidated)/ToR will be applicable as per the Order of Mission Director, NHM & Secretary, H & FW Department, Govt. of West Bengal vide Memo No HFW-35099/188/2021/3244, Dated 28.10.2021.

Designation	Vacant Posts	Essential Criteria	Essential Experience	Remuneration	Age limit
Co-ordinator	01 (One) each for Alipurduar District Hospital and Integrated AYUSH Hospital, Tapsikhata (HUB and SPOKE)	1) Post Graduation Diploma/ Degree in Health Care Management / Hospital Administration 2) Proficiency in using MS-Office	At least 2 years experience of working with Government / Non-Government organization.	Rs. 45000/- per month	Minimum 21 years to Maximum 40 years as on 01/01/2021
Data Entry Operator	01 (One) each for Alipurduar District Hospital and Integrated AYUSH Hospital, Tapsikhata (HUB and SPOKE)	1) Graduate from any recognized university and have completed at least 1 year Diploma / Certificate course in Computer Application from Govt. registered Institution. 2) Working Knowledge of Computers with operating knowledge of MS Word, MS Excel, MS Power Point, MS Access and Internet	Minimum 3 years experience in Government Sector or 5 years experience in Private Sector in data recording and data analysis	Rs. 13560/- per month	Minimum 21 years to Maximum 40 years as on 01/01/2021

General Instructions:

- 1) Essential qualification degree through Distant Learning Course or from any Open University will not be entertained.**
- 2) The engagement contract period will be up to 31-Mar-2022 only.**
- 3) Mode of Selection:**
 - a) Screening of documents, b) Computer Test, c) Interview**Note-** Final selection will be made on the basis of total marks obtained in academic qualification (weighted) experience, computer test and interview (as per ToR).
- 4) All the above-mentioned qualification should be completed before the date of advertisement for the post.**
- 5) Applicants are requested to visit www.wbhealth.gov.in at the URL "Recruitment" regularly for instruction / information issued from time to time.**

The applicant must submit attested/self attested copies of all relevant supportive documents in the specified format along with Non-Refundable Demand Draft of Rs. 100/- (Rs. 50/- for reserve category candidates) in favour of **CHIEF MEDICAL OFFICER OF HEALTH, ALIPURDUAR** are to reach the office of the Chief Medical Officer of Health & Chairman, District Selection Committee, Matrisadan (1st floor), Ward No. XVI, New Alipurduar, Alipurduar, Pin code: 736121 by **24.11.2021 at 4 PM only by registered post/speed post/courier**. The department will not be responsible for any postal delay.

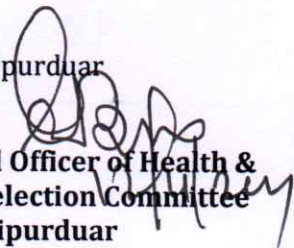

Chief Medical Officer of Health &
Chairman, Selection Committee
Alipurduar

Memo.CMOH/APD/No. 3465 /1(4)

Date: 12/11/2021

Copy for information with a request to display in the office notice board along with the TOR:

1. The District Magistrate, Alipurduar
2. The ADM (Health), Alipurduar
3. The SDO, Alipurduar
4. The Superintendent, District Hospital, Alipurduar / AYUSH Hospital, Tapsikhata, Alipurduar

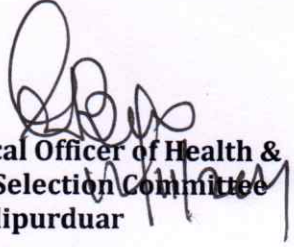

Chief Medical Officer of Health &
Chairman, Selection Committee
Alipurduar

Memo.CMOH/APD/No. 3466 /1(11)

Date: 12/11/2021

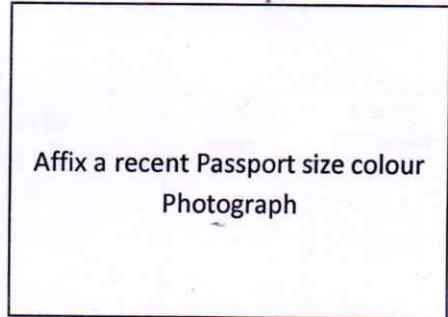
Copy for information to:

1. The Director of Health Services & e.o. Secretary, Govt of West Bengal
2. The Mission Director, NHM & Commissioner (FW) & Secretary of the Govt of WB
3. The Additional Mission Director, NHM, Govt of WB, Kolkata
4. The Deputy CMOH - I / II / III / DMCHO / ZLO / DPHNO, Alipurduar
5. The ACMOH / DTO, Alipurduar
6. The Accounts Officer, Office of the CMOH, Alipurduar
7. The In-Charge, Information & Technology Cell, Department of Health & Family Welfare, Government of West Bengal, Swasthya Bhawan, GN - 29, Sector - V, Salt Lake, Kolkata - 91 with request to upload the Recruitment Notice in the departmental website of H&FW Dept.
8. The D.I.O, NIC, Alipurduar, O/o the District Magistrate, Alipurduar, Dooars Kanya with request to upload the Recruitment Notice in the district website.
9. The HR Cell, Swasthya Bhawan, Kolkata-91
10. The DPMU, Alipurduar
11. Office copy


Chief Medical Officer of Health &
Chairman, Selection Committee
Alipurduar

APPLICATION FORMAT
(USE BLACK/BLUE BALL PEN FOR FILLING UP THE APPLICATION)

To
The Chief Medical Officer of Health
Chairman, District Selection Committee
New Alipurduar, Matri Sadan Building 1st Floor,
Ward No. XVI, Alipurduar, Pin: 736121
West Bengal



Application for the post of _____

1. Name in Full (In Block Letters) : _____

2. Name of the Father / Husband : _____

3. Date of Birth :

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4. Age as on 01.01.2021 : _____

5. Sex (Please tick the suitable) : Male Female

6. Nationality : _____

7. Permanent Address : _____

P.S. _____ P.O. _____

District: _____ State: _____

Pin: _____

8. Present Postal Address : : _____

P.S. _____ P.O. _____

District: _____ State: _____

Pin: _____

9. Contact No : _____

10. Email ID : _____

11. Caste :

(Please enclose self attested
Photocopy of caste certificate)

12. Educational Qualification : (Self attested photocopies must be enclosed)

Sl. No.	Examination Passed	Year of Passing	Board / University	Total Marks	Marks Obtained

- N.B: a. *In case self attested mark sheets are not attached with the application, the marks will not be considered*
b. *Total marks & marks obtained should be excluding additional subjects and should be in absolute numbers and not in percentage*

13. Computer Qualification :
(Please enclose self attested
Photocopy of computer certificate)

14. Details of Work Experience :
(Please enclose self attested photocopy of experience certificate clearly mentioning the period of work with monthly salary in the official letter head with signature, seal and date)

DECLARATION

"I hereby declared that all statements made in this application are correct to the best of my knowledge and belief and in the event of my information being found false my candidature is liable to be cancelled."

Place:

Date:

(Full Signature of the Applicant)