



**Government of West Bengal**  
**Office of the Chief Medical Officer of Health Alipurduar**  
Babupara, Maya Talkies Road, Ward No-12,  
District-Alipurduar, Pin: 736121  
Tele:03564-257200, email:cmohapd@gmail.com



Memo. No. DH&FWS/APD/2022-23/No. 694

Date: 11.11.2022

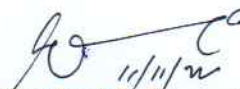
**ORDER**

In accordance to the notification, vide memo no. DHFWS/APD/328 Dated 30.06.2022 of CMOH & Secretary, DH&FW Samiti, Alipurduar, the following candidate has been selected and appointed as **Community Health Assistant(Urban)** under **NHM** on contractual basis at a monthly consolidated remuneration of Rs 13,000/- (Rupees Thirteen Thousand ) only .

Sl No	Name of the Candidate	Guardian's Name	Address	Date of Birth
1	Arpita Paul	Sourav Roy	Vill: Chachakhata, P.O-Alipurduar Jn. P.S+Dist.- Alipurduar, Pin- 736123	04.12.1993

The above-mentioned candidate is hereby engaged as per the terms and condition mentioned below:

1. The order of engagement will take effect from the date she joins the post.
2. The period of contract may be extended subject to approval of the position in the next financial year and satisfactory performance.
3. The service may also be terminated by one (01) months' notice from either side. If the incumbent proposes to cease her work without covering one (01) months' notice period, their remuneration will be deducted accordingly.
4. Payment of remuneration will be made from the respective programme fund and as per existing norms.
5. The candidate directed to report for joining the post at the office of the CMOH & Secretary, DH&FW Samiti, Alipurduar, mentioned against her name with downloaded engagement order, photo identity proof and **Medical Fitness Certificate (enclosed herewith) issued by the registered M.B.B.S. practitioner.**
6. The candidate should join on any working day on or before **28.11.2022**.
7. If the candidate fail to report to the office of the CMOH & Secretary, DH&FW Samiti, Alipurduar within stipulated period, she will not be allowed to join later and her engagement will stand cancelled after that period and the vacant post will be filled up by the next meritorious candidate in the panel of selected candidates in waiting.
8. The Candidate will not be entitled for annual Increment for 03 (Three) consecutive financial years i.e.2022-23, 2023-2024 & 2024- 2025.
9. No TA/DA is admissible for joining.

  
11/11/22  
Chief Medical Officer of Health & Secretary  
DH&FWS, Alipurduar





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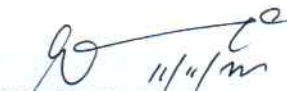


Memo. No. DH&FWS/APD/2022-23/No. 694/1(5)

Date: 11.11.2022

**Copy forwarded for information to:**

1. The Chairman, District Level Selection Committee, Alipurduar
2. The District Magistrate, Alipurduar
3. The ADM (Health), Alipurduar
4. The SDO, Alipurduar
5. The DMDC & OC (Health), Alipurduar

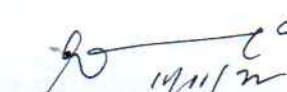
  
11/11/22  
Chief Medical Officer of Health & Secretary  
DH&FWS, Alipurduar

Memo. No. DH&FWS/APD/No. 694/2/14

Date: 11.11.2022

**Copy forwarded for information to :-**

1. The Mission Director (NHM) & Executive Director, West Bengal Health & Family Welfare Samiti
2. The Director of Health Services, Govt. of West Bengal, Swasthya Bhawan
3. The PO-I, NHM, Deptt. of H&FW, Govt. of West Bengal
4. The DDHS(HA), Govt. of West Bengal, Swasthya Bhawan
5. The Dy. CMOH-I/Dy. CMOH-II/ Dy. CMOH-III/ZLO/DMCHO/DPHNO, Alipurduar
6. The Superintendent, District Hospital, Alipurduar
7. The ACMOH/DTO, Alipurduar
8. The Accounts Officer, O/o the CMOH, Alipurduar
9. **The DIO, NIC, Alipurduar, Dooarskanya, Alipurduar with request to publish the advertisement in the website [www.alipurduar.gov.in](http://www.alipurduar.gov.in)**
10. **The System Coordinator, IT Cell, Health & Family Welfare Department, Swasthya Bhawan, Kolkata-91 with request to publish the advertisement in the website [www.wbhealth.gov.in](http://www.wbhealth.gov.in)**
11. The HR Cell, Swasthya Bhaban, Kolkata
12. **Arpita Paul** for compliance
13. The DPMU, Alipurduar
14. Office Copy

  
11/11/22  
Chief Medical Officer of Health & Secretary  
DH&FWS, Alipurduar

**Medical Certificate in case of appointment of candidates under  
West Bengal State Health & Family Welfare Samiti**

Name of the candidate in full (in block letters) :  
 Height (without shoe) : Cm.  
 Weight : Kg.

"I hereby certify that I have examined Sri/Smt....., a candidate for employment in the West Bengal State Health & Family Welfare Samiti, and can't discover that Sri/Smt..... has any disease, (communicable or otherwise) constitutional weakness or bodily infirmity, except.....

I do not consider this a disqualification for employment in the office of State Samiti. Sri/Smt.....'s age is, according to his own statement..... Years, and by appearance about.....years".

- a. General Development : Good/Fair/Average/Poor
- b. Vision : Right eye: Left eye:  
 i. Uncorrected/Naked eye :  
 ii. Corrected :  
 iii. Nature and degree :
- c. Teeth : d. Hearing : e. Blood pressure :
- f. Lung : g. Heart : h. Liver :
- i. Spleen :
- j. Hernia (present or absent) :
- k. Hydroceles (present or absent) :
- l. Urine i. Specific Gravity ii. Albumin iii. Sugar
- m. Identification marks :
- n. The Candidate is :

i. Fit :

ii. Unfit on account of :

iii. Temporarily unfit on account of :

Dated:

Signature of the Medical Practitioner

Name :

Degree :

Regn. No. :  
(Seal)

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Signature of Candidate

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Attested