Memo No. DH&FWS/NRHM/2013/107
Dated: 19th December, 2013

Sub: Advertisement Notification for Selection of Para Medical Workers under NLEP

Applications are hereby invited from the eligible candidates for selection of the Para Medical Workers on contractual basis under NLEP. The details terms and conditions of selection for the said post along with the posting details are given below:

The posting details:

<table>
<thead>
<tr>
<th>Place of posting</th>
<th>No. of post of PMW sanctioned</th>
<th>Name of the urban area where PMW will be engaged</th>
<th>Status reservation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office of the Zonal Leprosy Officer, North 24 Parganas</td>
<td>1 (one)</td>
<td>Barasat Municipality, North 24 Parganas</td>
<td>Unreserved</td>
</tr>
<tr>
<td>Office of the Chief Medical Officer of Health, Basirhat Health District</td>
<td>1 (one)</td>
<td>Basirhat Municipality, Basirhat Health District</td>
<td>Unreserved</td>
</tr>
</tbody>
</table>

Terms and condition of selection: The following terms and conditions for the post of Para Medical Workers on contractual basis under NLEP are furnished hereunder in accordance with the Govt. Order Vide Memo No. SLS/07-2013/209, Dated; 19/09/2013 issued by the Jt. Director of Health Services (Lep) & State Leprosy Officer, Govt. of West Bengal and as per approval of the District Health & Family Welfare Samiti, North 24 Parganas.

- Minimum educational qualification is Higher Secondary pass.
- Age not exceeding 40 years on the date of application invited
- Holding certificate of PMW issued by the Department of Health & Family Welfare, Government of West Bengal or by the appropriate authority of Government of India will be given preference or MSW / BSC with three years experience in the field of health
- Experience in NLEP activities will get additional wastage
- Basis Computer Knowledge: Diploma or certificate holder in computer application from the recognized institution

N.B. Applications will be accepted as per prescribed format attached herewith (vide Annexure-A) through register post only within 20th January, 2014 from 20th December, 2013. No applications will be considered after stipulated time as noted above. Only sort-listed candidates will be called for interview and computer test as per marks obtained in their educational qualification.

Chief Medical Officer of health
North 24 Parganas

Zonal Leprosy Officer
North 24 Parganas
Annexure-A

Application for the post of Para Medical Workers under NLEP, North 24 Parganas

1. Name of the Candidate (Capital Letter): ..................................................

2. Age as on 20/12/2013 ...............................................................

3. Sex: (Male / Female) .................................................................

4. Father's Name ........................................................................

5. Postal Address: ........................................................................

6. Educational Qualification ..........................................................

<table>
<thead>
<tr>
<th>Qualification</th>
<th>Board / Council / University</th>
<th>Year of passing</th>
<th>Total marks</th>
<th>Marks obtained</th>
<th>% of marks obtained</th>
</tr>
</thead>
<tbody>
<tr>
<td>Secondary</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Higher Secondary</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

7. Furnish details of certificate of PMW issued by the Department of Health & Family Welfare, Government of West or MSW / BSC with three years experience in the field of health ............................................................ (copy of certificate duly attested by the Gazetted Officer to be attached)

8. Furnish details of Experience in NLEP : ........................................................................................................

...........................................................................................................(copy of certificate duly attested by the Gazetted Officer to be attached)

9. Basic Computer Knowledge: Diploma or certificate holder in computer application from the recognized institution: ..........................................................(copy of certificate duly attested by the Gazetted Officer to be attached)

DEPARTMENT

I do hereby declare that all the statement given above by me are true and correct in all respect. If any statement found false at the time of examination / interview or after any appointment then my candidature will liable to be cancelled or my service will terminate automatically.

Date: ..........................................................

SIGNATURE OF THE APPLICANT

N.B.: Application forms not properly filled in or incomplete Application forms are liable to be cancelled.