



ORDER

In reference to the recruitment notice no. DH&FWS/NHM/2018/232, Dated 05.02.2018, the candidates of Annexure-A has been selected category wise as **Lab Technician-ICTC under WBSAPCS** on purely contractual basis at a monthly remuneration of **Rs. 13000/- (Rupees Thirteen thousand, - consolidated)** only and posted in place as mentioned against their respective names "**Place of Posting**".


The candidate of Annexure-A (UR category) is hereby engaged as per the terms and conditions mentioned below:-

- 1). The order of engagement will take effect from the date he/she joins the position.
- 2). The period of contact will automatically be terminated after expiry of 31.03.2020.
- 3). If the incumbent proposes to cease his/her work without covering 1 month's notice period, his/her remuneration will be deducted accordingly.
- 4). The period of contract may be extended further subject to approval of the position in the next financial year and satisfactory performance of the personal.
- 5). The service may also be terminated by one month's from either side.
- 6). The candidates are directed to report for joining for the position to the CMOH, North-24PGs. After joining the candidates must report to the Dy. CMOH- II, N-24 PGs for execution of bond. The concerned Superintendents will send joining report of **Lab Technician-ICTC** immediately (within 2days of joining) to the CMOH and Dy. CMOH-II for maintenance of HR database.
- 7). The candidate should join within 20th September 2019.
- 8). Any person failing to report to designated office within stipulated period, may not be allowed to join later and his/her engagement stands cancelled after that period.
- 9). No TA/DA is admissible for joining.
- 10). The candidates are instructed to bring three copies of joining letter on the date of Joining at the office of the CMOH- N24PGS.
- 11). The candidates are instructed to bring ID proof on the date of Joining at the office of the CMOH, North-24PGs, District Hospital Campus, Barasat.
- 12). The Candidates has to produce a Medical Fitness Certificate from the registered Medical Practitioner (holding MBBS) in the enclosed proforma attached herewith (Annexure-B).


Chief Medical Officer of Health
North 24 Parganas

Copy forwarded for information & necessary action please to the:

1. Director of Health Services, to the Govt. of West Bengal, Swasthya Bhawan, Kolkata-91
2. Secretary(PHP), & MD(NHM), to the Govt. of West Bengal, Swasthya Bhawan, Kolkata-91
3. Additional Mission Director, FW & Secretary to the Govt. of West Bengal
4. Project Director- WBSAP&CS, Swasthya Bhawan, Kolkata-91
5. District Magistrate, N-24PGs
6. Concerned Superintendent with a request to accept the joining of **Lab Technician-ICTC under WBSAPCS** and requested to send her joining report for disbursement of salary.
7. OC (Health), N-24PGs
8. Dy. CMOH-I / II / III / ZLO / DMCHO / DPHNO / DTO , N-24PGs
9. Accounts Officer, CMOH Office, N-24PGs
10. DPMU, N-24PGs


Chief Medical Officer of Health
North 24 Parganas

Annexure-A

List of Selected Candidates of Lab Technician- ICTC- N24 PGS					
SL No.	Application ID	Name of the Candidate	Address	Category	Place of Posting
1	LTI-066	Sujata Saha	SODEPUR, KADAMTALA, NATAGARH, N24PGS, 700113	UR	Barasat DH, North 24 Parganas


Chief Medical Officer of Health
North 24 Parganas

**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. Hemia (present or absent) :
 k. Hydroceles (present or absent) :

l. Urine i. Specific Gravity ii. Albumin iii. Sugar

m. Identification marks :
 n. The Candidate is :

Three empty rectangular boxes stacked vertically, likely for a stamp or seal.

- i. Fit :
- ii. Unfit on account of :
- iii. Temporarily unfit on account of :

Dated:

Signature of the Medical Practitioner

Name :

Degree :

Regn. No. :
(Seal)

Signature of Candidate

Attested