**RECRUITMENT NOTICE**

District Health & Family Welfare Samiti, Malda will engage purely on contract basis for the following posts:

<table>
<thead>
<tr>
<th>Sl No</th>
<th>Name of the Post</th>
<th>No of Post &amp; reservation post</th>
<th>Post Code</th>
<th>Educational Qualification</th>
<th>Period of Engagement (Renewable one year at a time subject to satisfactory performance)</th>
<th>Age (As on 01.07.2019)</th>
<th>Remuneration (Consolidated) Rs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Senior Treatment Supervisor (STS)</td>
<td>01(JR)</td>
<td>01</td>
<td><strong>Essential Qualification-</strong>&lt;br&gt;1. Bachelor’s Degree OR Recognized sanitary inspector’s course&lt;br&gt;2. Certificate course in computer operation (minimum 2 months)&lt;br&gt;3. Permanent two wheeler driving license &amp; should be able to drive two wheeler&lt;br&gt;<strong>Preferential Qualification-</strong>&lt;br&gt;1. Tuberculosis health visitor’s recognized course&lt;br&gt;2. Govt. recognized degree/diploma in Social work or Medical Social Work&lt;br&gt;3. Successful completion of basic training course (Govt. recognized) for Multi-purpose health workers</td>
<td>Upto 31.04.2020</td>
<td>Below 40 years</td>
<td>Rs.17,270/- per month</td>
</tr>
<tr>
<td>B</td>
<td>Senior Treatment Supervisor (STS)</td>
<td>01 (ST)</td>
<td>02</td>
<td><strong>Essential Qualification-</strong>&lt;br&gt;1. Bachelor’s Degree OR Recognized sanitary inspector’s course&lt;br&gt;2. Certificate course in computer operation (minimum 2 months)&lt;br&gt;3. Permanent two wheeler driving license &amp; should be able to drive two wheeler&lt;br&gt;<strong>Preferential Qualification-</strong>&lt;br&gt;1. Tuberculosis health visitor’s recognized course&lt;br&gt;2. Govt. recognized degree/diploma in Social work or Medical Social Work&lt;br&gt;3. Successful completion of basic training course (Govt. recognized) for Multi-purpose health workers</td>
<td>Upto 31.04.2020</td>
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</tbody>
</table>

Secretary District Health & Family Welfare Samity & Chief Medical Officer of Health, Malda
Memo No: DH & FWS/1227/11(1)/2019

Copy forwarded for information and necessary action to:

1. The Chairman, Recruitment Committee (D), Malda
2. The District Magistrate, Malda
3. The Addl. District Magistrate (G), Malda
4. The Addl. District Magistrate (ZP), Malda
5. The Chairman, Englishbazar/Old Malda Municipality, Malda
6. The MSVP, Malda MMC&H, Malda
7. The Dy. CMOH-III, DMCHO, DTO, Malda
8. The District Informatics Officer (NIC), Malda, District Collectorate Building, Malda with request to publish the recruitment notice in www.malda.gov.in
9. All BMOH, ......................................................, Malda
10. Mr. Sourav Ghosh, System Co-ordinator, IT Cell, Swasthya Bhawan, Kolkata with request to publish the recruitment notice in www.wbhealth.gov.in
11. The HC, CMOH Office Malda with request to make arrangement of recruitment process.

The DPC(RNTCP/DPMU), DAM, DSM, DPMU, Malda with request to co-operate.

Secretary District Health & Family Welfare Samity
& Chief Medical Officer of Health, Malda
General Information & instructions for Applicants

1. Application with Application fee of Rs. 100.00 (50% i.e. Rs. 50/- for reserved categories) by Demand Draft in favour of District Health & Family Welfare Samity, Malda should be submitted in prescribed format for all posts. Application should reach at the Office of the Secretary, District Health & Family Welfare Samity & Chief Medical Officer of Health, Malda, P.O.-Jhalijhalia (J.R.C.), Dist:- Malda, Pin- 732102 within 26.07.2019. Applicants may collect the application format from the Notice Board of the Office of the CMOH, Malda or download the same from the website i.e. www.malda.gov.in / www.wbhealth.gov.in

2. Following documents (self attested) have to enclose with the application format:
   i. Mark Sheet & Certificate of all Examination passed
   ii. Admit Card (Madhyamik or equivalent) for age proof
   iii. Caste Certificate (where applicable)
   iv. Registration Certificate of Medical Council (For Medical Officer)
   v. Computer Qualification Certificate (where applicable)
   vi. Working Experience Certificate (if any)
   vii. Technical Knowledge Certificate (if any)
   viii. Residential Proof – Voter ID Card/ Ration Card/ Adhaar Card/ Passport/ Certificate from competent authority etc.
   ix. ID Proof - Voter ID Card/ Ration Card/ Adhaar Card/ Passport etc;
   x. 02 copies of Self signed color pass port size recent photographs bring in the Walk-in-Interview.

3. Selection Process:
   Post: Senior Treatment Supervisor (STS)
   Total- 50 Marks

4. Educational Qualification: 50 Marks

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<tr>
<th>Examination Passed</th>
<th>Maximum Marks</th>
<th>Remarks</th>
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<tbody>
<tr>
<td>Madhyamik</td>
<td>20</td>
<td>Marks will be awarded in proportion to the actually obtained in each examination, rounded to decimals. If a candidate has 60% marks in Madhyamik, he will get 6 out of 10 and so on. Additional subject where the marks in excess of pass marks are added to the aggregate will not be considered</td>
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<tr>
<td>Higher Secondary</td>
<td>20</td>
<td></td>
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<tr>
<td>Graduation/ Sanitary inspector's course</td>
<td>10</td>
<td></td>
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<td>Total</td>
<td>50</td>
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</table>

5. All original documents need to be shown at the time of document verification
6. A panel of the suitable candidates will be prepared for each category of posts & remain valid for 1 year from its publication.
7. The candidature of the applicant shall be cancelled at any stage of recruitment if the supportive certificate and information given in application is found false.
8. District Health and Family Welfare Samity reserves the right to cancel the recruitment process at any stage without assigning any reason thereof. The decisions of the selection committee in any case should be considered final.
9. Canvassing in any form will be considered as disqualification.
10. Incomplete application will be rejected.

Secretary, District Health & Family Welfare Samity
& Chief Medical Officer of Health, Malda
APPLICATION FORMAT
(To be filled up by the candidates own hand writing)

To
The Secretary, DH & FW Samity
& CMOH, Malda

Application for the post of & post code

Draft No. __________________ Date: __________________

Name of the applicant (in BLOCK letters) : __________________

Father’s/ Husband’s/ Guardian’s Name : __________________

Full Address for correspondence : __________________

Dist. ____________ PIN ____________

Present Address : __________________

Dist. ____________ PIN ____________

Contact Number: __________________ Nationality __________________

Email ID: __________________

Date of Birth : ____________ dd ____________ mm ____________ yyyy Sex __________________

Age as on 01.07.2019 ____________ days ____________ months ____________ years.

Caste Status: __________________ Marital Status __________________

Educational Qualification (Attested copy must be submitted with the application):

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Exam. Passed (Strike out which is not applicable)</th>
<th>Year of passing</th>
<th>Board / Council / University</th>
<th>Total Marks</th>
<th>Marks Obtained</th>
<th>% Marks</th>
<th>Division</th>
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<tr>
<td>a.</td>
<td>Madhyamik</td>
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<td>b.</td>
<td>Higher Secondary/Sanitary Inspector</td>
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<td>c.</td>
<td>Graduation (BA / B.Com. / B.Sc.)</td>
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<td>MBBS / BCA</td>
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<td>e.</td>
<td>Post Graduation</td>
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<td>f.</td>
<td>Others</td>
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### Details of Technical Qualification (Attested copy must be submitted with the application):

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<th>Sl. No.</th>
<th>Exam. Passed</th>
<th>Year of passing</th>
<th>Board / Council / Institution/ University</th>
<th>Total Marks</th>
<th>Marks Obtained</th>
<th>% Marks</th>
<th>Division/ Result</th>
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### Details of Working Experience (Attested copy must be submitted with the application):

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Name of the Organization / Institution</th>
<th>Key task assigned</th>
<th>Period</th>
<th>Year of experience</th>
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<td>From</td>
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Total Year of Experience:

I hereby declare that all the statements made by me in the application are true and complete to the best of my knowledge and belief. I also understand that in case any of my statement is found false or incorrect during any stage of recruitment thereafter it shall disqualify me for the post applied for and/or I shall be liable for any other action that may be taken under the extant rules.

Date: ____________________________

Signature of the Applicant

Place: ____________________________

**General Information & Instructions for the applicant:**

Following documents in original have to produce:

(a) Mark sheet of all examination passed
(b) Academic Admit Card
(c) Academic Certificate
(d) Technical Training / Computer Training Certificate
(e) Working Experience Certificate
(f) Residential Certificate
(g) Voter ID Card & Ration Card
(h) Cast Certificate, where applicable.