

WEST BENGAL STATE HEALTH & FAMILY WELFARE SAMITI

Registration No: S/IL/14448 of 2002-2003

Swasthya Bhawan, 'B' Wing, 3rd Floor, GN-29, Sector-V, Salt Lake, Kolkata-700091

Memo No: HFW-NRHM-753/2011 (Vol-I)/ 865 (2)

Date: 03/05/2023


ORDER

In reference to the Recruitment Notice No. SHFWS/2021/209, dated: 05-02-2021 and Addendum No. HFW-NRHM-753/2011 (Vol-I)/1565, dated: 09/02/2021 the following candidates are hereby engaged for the position of **District Accounts Manager** under National Health Mission. They will get a consolidated monthly remuneration of `42,000/- (Rupees forty two thousand) only. They will be posted in places as mentioned against their respective names in the column "Place of posting".

Sl.	Name	Guardian's name	DOB	Caste	Address	Place of posting
1	DIBYENDU SAHA	DILIP SAHA	17-08-1985	UR	22/1 Baroaritala Road, Durganagar, Badra, Italgacha, Dumdum, North 24 Parganas, West Bengal, Pin-700079	Rampurhat Health District
2	PRODIP KUMAR NAYEK	Late UMAPADA NAYEK	07-07-1987	UR	Sridharpur, Galsi, Purba Bardhaman, West Bengal, Pin-713406	Nandigram Health District

The above mentioned candidates are hereby engaged as per the terms and condition mentioned below:

- 1) The order of engagement will take effect from the date he joins the position.
- 2) The period of contract will automatically get terminated at the end of the current financial year and subsequently it will be renewed based on the Annual Performance Report of the employee, and subject to RoP approval.
- 3) The engagement in the said position is under NHM and shall be coterminous with NHM.
- 4) The service may also be terminated by one month's notice from either side.
- 5) If the incumbent proposes to give up his work without covering 01 (one) month's notice period, his remuneration will be deducted accordingly.
- 6) Payment of remuneration will be made from Tally code: B.184.A.II
- 7) The candidates are directed to report for joining for the position to the **CMOH of their respective Health District** as mentioned against their names with downloaded engagement order, self photo ID & address proof and Medical Fitness Certificate (enclosed herewith) issued by the registered medical practitioners.
- 8) The candidates should **join within 15 days** from the date of issuance of this Order.
- 9) Any person failing to report to designated office within stipulated period, may not be allowed to join later and his engagement stands cancelled after that period.
- 10) As mentioned in addendum issued vide no. HFW-27011/137/2020/1611 dated 23/02/2021 point no. ii, All new employees who have joined / will be joining between 29th December, 2020 to 30th September 2024 against new entry point remuneration as per memorandum vide no. HFW-27011/137/2020/1352 dated 29/12/2020, will not be entitled for annual increment for two financial years i.e. 2023-24 and 2024-25. Annual increment will be applicable for these new contractual employees from financial year 2025-26.
- 11) No T.A. / D.A. is admissible for joining.



Executive Director
W.B.S.H. & F.W Samiti

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Copy forwarded for information and necessary action to the:

- 1) Commissioner Food Safety & Secretary to the Govt. of WB, Swasthya Bhawan.
- 2) Additional Mission Director, NHM, Department of Health & Family Welfare, Govt. of West Bengal.
- 3) Financial Advisor, Department of Health & Family Welfare, Govt. of West Bengal.
- 4) Programme Officer-I, NHM & Deputy Secretary to the Govt. of WB, H & FW Deptt
- 5-6) Chief Medical Officer of Health, Rampurhat Health District / Nandigram Health District.
- 7) Sr. AO, NHM, Swasthya Bhawan.
- 8-9) Deputy CMOH (In charge of HR), Rampurhat Health District / Nandigram Health District.
- 10-11) District Programme Manager, Rampurhat Health District / Nandigram Health District.
- 12-13) Dibyendu Saha / Prodip Kumar Nayek is directed to join as per point no. 7 & 8 mentioned above.
- 14) State HR Cell, "Swasthya Sathi" Building, Swasthya Bhawan premises.
- 15) Office Copy.


Executive Director
W.B.S.H. & F.W Samiti

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 an account of :

iii. Temporarily unfit on account of :

Dated:

Signature of the Medical Practitioner

Name :

Degree :

Regn. No. :

(Seal)

Signature of Candidate

Attested