

Government of West Bengal
Office of the Chief Medical Officer of Health
District Health and Family Welfare Samiti, Hooghly

Memo No. 8355

Date: 16.12.2016

NOTICE

Applications are invited for admission in two years Auxiliary Nursing & Midwifery (ANM) course for Urban Public Health Centres (UPHC) of the Urban Local Bodies (ULB) under National Urban Health Mission (NUHM) from the eligible female candidates.

Total No, of Seats : 43

Reservation of Seats : Refer to Annexure II

Instruction:

- Only Female candidates are eligible to apply for the training course.
- The candidate should be a permanent resident of the particular ULB for which she will be selected. In case of Municipal Corporation, candidate must be the resident of any borough of that particular Municipal Corporation for which she will apply.
- Age of the candidates should be between 25-35 years as on 01/10/2016. For the candidate belonging to SC/ST/PH Category, a 5 years relaxation will be admissible in the upper age limit whereas for the candidates belonging to the Other Backward Classes (OBC-A/B) Category, a 3 years relaxation will be admissible.
- The Candidate should be a married or divorced or widowed woman.
- Minimum educational qualification should be Higher Secondary (10+2) from West Bengal Council of Higher Secondary Education or equivalent examination passed from any recognized Council/Board.
- Selection will be purely on merit, based on the marks obtained by the candidates in the best five subjects (**except Environmental Science/Studies**) in the Higher Secondary Examination (**10+2**) or equivalent examination. **The applications of candidates from the vocational stream will not be considered.**
- The application from the eligible candidates will be submitted to the concerned Chief Medical Officer of Health (CMOH) Office in the prescribed format. (Annexure-I).


Annexure II

Distribution of vacancies (43) -

Sl.No	ULB	UR	SC	ST	OBC A	OBC B	PH	Total
01.	Chandannagar	2	1	0	0	0	0	3
02.	Dankuni	2	1	0	0	0	0	3
03.	Hooghly Chinsurah	3	1	1	0	0	0	5
04.	Konnagar	2	1	0	0	0	0	3
05.	Rishra	2	1	1	0	0	0	4
06.	Serampore	3	1	1	1	0	0	6
07.	Uttarpara- Kotrang	2	1	1	0	0	0	4
08.	Arambagh	0	1	0	0	0	0	1
09.	Baidyabati	2	1	1	0	0	0	4
10.	Bansberia	2	1	0	0	0	0	3
11.	Bhadreswar	2	1	0	0	0	0	3
12.	Champdany	2	1	1	0	0	0	4

- The application should be accompanied with self attested photocopies of each of the following documents .If no document is submitted with the application, the application will be rejected (this will be followed strictly).
 1. Proof of residence in original issued by the competent authority.

2. Age – proof (Admit card/Certificate of Madhyamik Pariksha)
3. Mark sheet of Higer Secondary or equivalent examination.
4. Caste certificate in case of SC/ST/OBC-A/OBC-B candidates, issued by the competent authority of West Bengal.
5. Physically Handicapped Certificate issued by the competent authority of West Bengal.
6. One recent self-attested passport size colour photograph which is to be affixed on the top right hand corner of the application form.
 - Application must be sent by registered post/Speed Post/by hand only. Last date of receiving applications is 14th January, 2017. Application(s) will not be entertained if sent by any other mode or if it reaches after the scheduled receiving date i.e. 14th January, 2017.
 - No individual intimation will be given to the candidate about the rejection of application.
 - The ULB-wise panel(according to merit) would be displayed in the Notice Board of the CMOH Office for a week, after which the panel would be treated as final and further steps will be taken accordingly.
 - The selected candidates (medically fit) shall have to undergo training for 2 years duration.
 - During the period of training if any unlawful activities or violation of rules and regulations of the training course is found which is committed by any candidate or any document submitted by any candidate for admission into the training course is found to be false, she will be summarily discharged from the training course.
 - On successful completion of training, CMOH will engage the ANM with a direction to join to the respective ULB.
 - Application should be sent to the Chief Medical Officer of Health and Secretary, Dist. Health and Family Welfare Samiti, Hooghly, DRS Campus CMOH Administrative Building, Barabazar, Chinsurah, Hooghly 712101.


Chief Medical officer of Health
Hooghly

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Copy forwarded for information and NA Please-

1. The Mission Director, NHM, Swasthya Bhawan , GN – 29, Sec – V , Saltlake , Kolkata – 91.
2. The Addl. Mission Director, NHM, Swasthya Bhawan , GN – 29, Sec – V , Saltlake , Kolkata – 91.
3. The Honourable Mayor , Chandannagar Municipal Corporation, Chandannagar , Hooghly.
4. The Chairman , Dankuni/Hooghly-Chinsurah/Konnagar/Rishra/Serampore/Uttarpara-Kotrang/Arambagh/Baidyabati/Bansberia/Bhadeswar/Champdany, Hooghly.
5. The DIO, NIC, Hooghly – with request to publish the notice in the official website.
6. Sri Sourav Ghosh, IT- Coordinator, Swasthya Bhawan – with request to publish the notice in the official website.


Chief Medical officer of Health
Hooghly

Application for Admission to the ANM Training Course under NUHM

(Applied for. ULB)

To
The CMOH/CMHO
.....District

Enrolment No
(To be filled in by the receiving institution)



Sir/Madam,

I would like to apply for admission to ANM Training Course under NUHM. In this connection the requisite particulars and documents are given below:

1. Name (In block letters) :
2. Father's Name :
3. Husband's/ Guardian's Name :
4. Present Address(With Pin Code) & Phone No. :
5. Permanent Address (With Pin Code) :
6. The name of the ULB/Municipal corporation with Borough :
7. Date of Birth :
8. Age (As on 01.10.2016) :
9. Educational Qualification :
10. Details of Higher Secondary or Equivalent Examination. :

Name of the Examination	Name of the Council/ Board	Year of Passing	Total Marks (Aggregate) as per Best five subjects [Excepting Environmental Education]	Percentage of marks of column (d) subjects
(a)	(b)	(c)	(d)	(e)

(2)

11. Whether belong to SC/ST/OBC(A)/OBC(B) Category : Yes/No [please (V) wherever applicable]
(If yes, detailed statement and documents
in support of the statement)
12. Whether Physically handicapped/Not : Yes/No [please (V) wherever applicable]
(If yes, detailed statement and documents
in support of the statement)
13. Marital Status (Strike out which are not applicable) : Married/ Widow/ Divorcee
14. I hereby declare that the above mentioned particulars furnished by me are true to the best of my
knowledge and belief. I am able to read, write and speak in Bengali/ Nepali.

Yours faithfully,

Date:

Place:

Signature of the Applicant.