



GOVERNMENT OF WEST BENGAL
Office of the Chief Medical Officer of Health
District Health & Family Welfare Samiti, Jalpaiguri

(District Health Administrative Building, 1st Floor, Hospital Road, Jalpaiguri)
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Memo No: DH&FWS/JAL/2016/1271

Date: 15-12-2016

Recruitment Notice
(Contractual basis)

Applications for recruitment to the under mentioned contractual post under NUHM are invited from eligible candidates, the applications along with all relevant documents for which are to reach the **Office of the CMOH, Administrative Building, Hospital Road, Jalpaiguri, PIN: 735101**. The applications can also be put in the 'drop box' on weekdays during office hours by 14-01-17 at 4 PM.

Name of the Post	Trainee ANM under NUHM
Monthly honorarium	Rs. 9380/- per month after completion of training
Number of post & Category	Total=1 SC-1 (Jalpaiguri UPHC)
Eligible criteria	Women candidate can apply
Age (as on 01.01.2017)	Minimum 25 years & upper age limit 35 years. Relaxation of age 5 years for SC/ST candidate, 3 years for OBC
Residence	Should be a permanent resident of the particular municipality applied for
Condition	Should be a married or divorced or widowed women
Minimum qualification	Higher Secondary (10+2) or equivalent examination
Selection of process	The selection will be purely on merit based on the marks obtained by the candidates on the best five subject in the higher secondary examination (10+2) or equivalent examination
Submission of application	By speed post/ hand before 14-01-17 up to 4 pm above mention address
Documents required	a. Residence proof b. Age Proof (Admit card of MP) c. Marks sheet of higher secondary and equivalent examination d. Case Certificate in case of SC/ST/OBC-A/OBC-B
Selection of candidate will be as per merit and after selection the candidate will go for 2 years residential training. Successful completion of training CMOH will engage ANM to join in the respective ULB for work.	

Chief Medical Officer of Health
Jalpaiguri

APPLICATION FORMAT

Application for the post of Trainee ANM

To
The Chief Medical Officer of Health
&
Member Secretary, District Health & Family Welfare Samiti
Jalpaiguri, Administration Building 1st Floor,
Hospital Para, Jalpaiguri-735101
West Bengal

1. Name in Full (In Block Letters) :
2. Name of the Father / Husband :
3. Date of Birth :
4. Age as on 01.01.2017 : Yrs Months Days
5. Sex :
6. Nationality :
7. Address :
8. Marital Status :
9. Caste :
10. Contact No :
11. Educational Qualification :

Examination Passed	Year of Passing	Boar/ university	Full Marks	Marks Obtained (Best five subjects aggregate)	% of marks (within best five subjects)
HS(10+2)					

12. Enclosures : a.
b.
c.
d.

DECLARATION

"I hereby declare that all statements made in this application are correct to the best of my knowledge and belief and in the event of my information being found false my candidature is liable to be cancelled."

Place:

Date:

(Full Signature of the Applicant)