Government of West Bengal
Department of Health & Family Welfare
Office of the Chief Medical Officer of Health
P.O. Kalimpong- 734301
Email- cmohkalimpong1@gmail.com

1) Notification Number : DH&FW/COV/001
2) Name of the Post : Pharmacist
3) No. of Post : 01 (UR)
4) Place of Engagement : Tribeni COVID Hospital
5) Nature of Engagement : Purely on Contractual Basis upto 2 months (May be extendable)
6) Eligibility Criteria :
   - The candidate should have two years Diploma in pharmacy (D-Pharma) (ALLOPATHIC) recognised by the Government of West Bengal and registered as “A” Category Pharmacist under West Bengal Pharmacy Council.
   - Weightage will be given for Higher Qualification.
   - The Candidates must have proficiency in local language and must have efficiency in computers including MS office and internet.

7) Age : Upper age limit 40 years as on 10.08.2020
8) Remuneration : Rs. 16,860/- consolidated per month
9) Method of Selection : Scoring & walk-in-interview
10) Date : 20-08-2020
11) Venue : Office of the Chief Medical Officer of Health, Kalimpong
12) Time : 11 A.M onwards up to 3 PM

Scoring will be done on the as per the following criteria:-

<table>
<thead>
<tr>
<th>D-Pharma</th>
<th>B-Pharma</th>
<th>M-Pharma</th>
<th>Computer Test</th>
<th>Interview</th>
</tr>
</thead>
<tbody>
<tr>
<td>60(based on % of marks obtained in the examination)</td>
<td>70(based on % of marks obtained in the examination)</td>
<td>80(based on % of marks obtained in the examination)</td>
<td>15</td>
<td>05</td>
</tr>
</tbody>
</table>

Candidates must obtain at least 50% marks to qualify for the post

Note: For the abovementioned position the application must be permanent resident of West Bengal. Age relaxation will be given for the reserved candidates as per govt. Norms.

[Signatures]

Dr. Chief Medical Officer of Health & Family Welfare
& Nodal Officer
(Tribeni COVID Hospital)

Chief Medical Officer of Health
Govt. of West Bengal
Kalimpong
Government of West Bengal
Department of Health & Family Welfare
Office of the Chief Medical Officer of Health
P.O. Kalimpong- 734301
Email- cmoalkalimpong1@gmail.com

1) Notification Number : DH&FW/COV/002
2) Name of the Post : Lab Technician
3) No. of Post : 05- Reservation as per Govt. Norms.
4) Place of Engagement : Tribeni COVID Hospital
5) Nature of Engagement : Purely on Contractual Basis upto 2 months (May be Extendable)
6) Eligibility Criteria : HS Science with Bachelor in Medical Lab Technology/ Diploma in Medical Lab technology. (Recognised by WBHUS)
7) Essential Qualification : Higher qualification like B.Sc/M.Sc in Microbiology/ Bio- Technology from recognized institute/ University along with relevant experience in virology lab and / or handling RT PCR/ PCR machines.
8) Age : Upper age limit 40 years as on 10.08.2020.
9) Remuneration : Rs. 17220/- consolidated per month
10) Method of Selection : walk-in-interview
11) Date : 20-08-2020
12) Venue : Office of the Chief Medical Officer of Health, Kalimpong
13) Time : 11 A.M onwards upto 3:30 PM

<table>
<thead>
<tr>
<th>Academics</th>
<th>Experience</th>
<th>Interview</th>
<th>Local Residence</th>
<th>Computer Knowledge</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 (based on % of marks obtained in the final examination)</td>
<td>10</td>
<td>05</td>
<td>05</td>
<td>10 (Practical test)</td>
</tr>
</tbody>
</table>

Selection will be done on the basis of academics, experience, Local Residence and Interview.

Note: For the abovementioned position the application must be permanent resident of West Bengal. Age relaxation will be given for the reserved candidates as per Govt. Norms.

[Signatures]

Dy. Chief Medical Officer of Health
Department of Health & Family Welfare
Govt. of West Bengal
Kalimpong

Chief Medical Officer of Health
Department of Health & Family Welfare
Govt. of West Bengal
Kalimpong
APPLICATION FORMAT

To,
The Chief Medical Officer of Health,
Kalimpong.

Subject: Application for the post of ____________________________

1. Name in Full (In BLOCK Letter):- ________________________________

2. Sex (Put a tick) :-
   
   MALE

   FEMALE

3. Father’s/ Mother’s Name :- ________________________________

4. Date of Birth :- _________ / _________ / _________ (DD/MM/YY)

5. Age (as on date of Advertisement) :- ____________________________

6. Nationality :- ________________________________

7. Caste (SC/ST/OBC-A/OBS-B/ UR):- ________________________________

8. Address for communication:

                                                 
                                                 

9. Permanent Address:- ________________________________

10. Contact Number – Landline (with STD Code) __________________ / Mobile

    __________________

11. Email ID: ____________________________________

Space for pasting recent passport size colour photograph of the candidate with his/ her full signature there on

Space use for office use only
12. Essential Qualification:

<table>
<thead>
<tr>
<th>Qualification</th>
<th>Year of Passing</th>
<th>Subject(s)</th>
<th>University/Board/Institute</th>
<th>Total marks</th>
<th>Marks Obtained</th>
<th>Percentage of marks Obtained</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

13. Desirable Qualification:

14. Computer Knowledge:

15. List of Self attested Photocopies- Documents enclosed (NO other documents except mentioned below is required (Put Tick Mark in the box):

<table>
<thead>
<tr>
<th>Sl. No</th>
<th>Documents</th>
<th>Yes</th>
<th>No</th>
<th>Sl. No</th>
<th>Documents</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>One Color Passport size Photograph</td>
<td></td>
<td></td>
<td>02</td>
<td>Voter ID Card/ Aadhar card for verification of identity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>03</td>
<td>Ration card/ Electricity bill for verification of residential proof</td>
<td></td>
<td></td>
<td>04</td>
<td>Mark sheet &amp; Certificates of Educational Qualifications as per eligibility criteria</td>
<td></td>
<td></td>
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<tr>
<td>05</td>
<td>Certificates of experiences duty issued by the appropriate authority</td>
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</tr>
</tbody>
</table>

N.B.:-
1. Application received after the closing date will not be considered.

2. Any Attempt to unduly influence the selection process will lead to automatic disqualification of the application.

3. Only short listed candidate will be called for Computer Test & Interview.

4. The decision of the Competent Authority regarding the recruitment is final.
Declaration

I solemnly declare that all statements made in this application are true, complete and correct. Original documents will be procured on demand. I understand that the concerned authority reserve the right to reject my candidature upon short listing of the candidate based on qualification and experience.

Place ________________________________

Date ________________________________  Signature of the Candidate in Full