

OFFICE OF THE HOOGHLY ZILLA PARISHAD

P.O. - CHINSURAH, DIST.- HOOGHLY

Notification for Engagement of Part-time Contractual Homoeopathic Medical Officer for Gram Panchayat Level Dispensaries under State Budget Head and NHM (AYUSH)

Applications are invited from the Indian Citizen for filling up the vacant posts of part-time contractual Homoeopathic Medical Officers (22) under State Budget Head and part-time contractual AYUSH Homoeopathic Medical Officers (04) under National Health Mission) NHM for 26 (twenty six) nos. of Gram Panchayat level Dispensaries in total.

1) Eligibility Criteria:

A) Minimum Educational Qualification: Passed Higher Secondary examination, certified by 'West Bengal Council of Higher Secondary Education' or its equivalent.

B) Professional Qualification:

i) For Homoeopathy: (For Budget Head HMO)

A Bachelor Degree (BHMS) in Homoeopathy from a recognized University or Institution recognized by Central Council of Homoeopathy and must be registered with State or Central Council of Homoeopathy.

ii) For Homoeopathy: (For NHM Head HMO)

A post Graduate Degree (MD), a Graduate (BHMS) or a Diploma (DMS/DHMS) in Homoeopathy from an Institution recognized by Central Council of Homoeopathy and must be registered with State or Central Council of Homoeopathy.

2) Age: Age of candidate for part-time Contractual Homoeopathic Medical Officer in Gram Panchayat Dispensaries shall be not more than 50 years as on 01.01.2024. It is relaxable for 5 (five) years for SC/ ST candidates and 3 years for OBC candidates.

3) Language Known: Candidates must have knowledge in Bengali both in speaking and writing in case of HMO under Budget Head engagement.

4) Honorarium: As decided by Govt. of West Bengal time to time (Presently consolidated of Rs. 16,000/- per month).

5) Documents to be submitted:

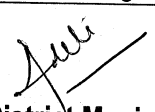
- a) One recent self attested passport size photograph to be fixed on the application.
- b) Admit card/ Certificate of Secondary Examination or equivalent or Birth Certificate issued by proper Government Authorities as age proof document.
- c) Mark Sheets as in certificates for professional qualifications.
- d) Any three of the EPIC, AADHAR, PAN, Ration Card, Passport, Bank Pass Book, Certificate of address having photo issued by 'Member of parliament' or 'Member of Legislative Assembly' or Group-A Gazetted Officer on proper letter head, household utility bill (Gas, Electric, Water, Fixed land line) showing name and current address (not more than three months old). Property/ Wealth tax assessment certificate with same details as address proof cum identity proof.
- e) Self-declaration of same present and permanent address (if any).
- f) Medical Registration Certificate.
- g) Caste Certificate where applicable.

(2)

- 6) One candidate can apply for more than one GP level dispensary. The name of the post (GP name along with head) to be clearly mentioned on sealed envelope.
- 7) Application in prescribed format as enclosed herewith, to be duly filled up by the candidate.
- 8) The duly filled up application should be submitted to the Block office concerned along with all relevant testimonials by 26.02.2024 (excluding Govt. holidays) within office time.
- 9) Application in other than the attached format, application through email or any other means will not be accepted. This application will be summarily rejected without any further notice to the applicant. The decision of the authority will be final.
- 10) Final selection will be made adding marks in Academic Qualification, Profession Qualification and Viva-voce taken together. Candidate will be called for interview in each post (i.e. for each Gram Panchayat) at Block level in case of more than one eligible candidate.

Details of the vacant Gram Panchayat level Dispensaries:-

Status of vacant posts of GP level dispensaries under State Budget Head and NHM				
Sl. No.	Name of Block	Sl. No.	Name of GPs	HMO, State Budget Head and NHM
A	B	C	D	E
1	Balagarh	1	Ektarpur	HMO, State Budget Head
2	Dhaniakhali	2	Dhaniakhali-II	HMO, State Budget Head
3	Pandua	3	Simlagarh Vitasin	HMO, State Budget Head
4	Haripal	4	Nalikul Paschim	HMO, AYUSH, NHM
		5	Paschim Gopinathpur	HMO, State Budget Head
5	Singur	6	Anandanagar	HMO, State Budget Head
		7	Basubati	HMO, State Budget Head
		8	Gopalnagore	HMO, State Budget Head
6	Tarakeswar	9	Champadanga	HMO, State Budget Head
		10	Baligori-I	HMO, State Budget Head
		11	Baligori-II	HMO, State Budget Head
7	Chanditala-I	12	Haripur	HMO, State Budget Head
8	Chanditala-II	13	Naity	HMO, AYUSH, NHM
		14	Kapasharia	HMO, State Budget Head
9	Jangipara	15	Dilakash	HMO, AYUSH, NHM
		16	Kotalpur	HMO, State Budget Head
10	Arambagh	17	Batanal	HMO, State Budget Head
		18	Arandi-I	HMO, State Budget Head
11	Khanakul-I	19	Kishorepur-I	HMO, State Budget Head
		20	Kishorepur-II	HMO, State Budget Head
		21	Pole-I	HMO, AYUSH, NHM
12	Khanakul-II	22	Natibpur-I	HMO, State Budget Head
		23	Jagatpur	HMO, State Budget Head
13	Goghat-I	24	Şaora	HMO, State Budget Head
14	Goghat-II	25	Paschimpara	HMO, State Budget Head
		26	Bengai	HMO, State Budget Head

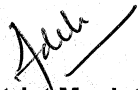

Additional District Magistrate, Hooghly
 &
Additional Executive Officer
Hooghly Zilla Parishad

Memo No. 392/1(269)/DPHC/HZP/24

Date: 09/02/2024

Copy forwarded for information and taking necessary action to the:

- 1) The Joint Secretary to the Govt. of WB, Panchayat and Rural Development Department, Joint Administrative Building, Block-HC/7, Sector-III, Salt Lake, Kolkata-700106.
- 2-10) The Karmadhakshya, _____ Hooghly Zilla Parishad, Hooghly (All).
- 11) The Chief Medical Officer of Health, Hooghly.
- 12-15) The Sub Divisional Officer, _____ Sub Division, Hooghly (All).
- 16) The Dy. Secretary, Hooghly Zilla Parishad.
- 17) The DIO, NIC, Hooghly with a request to upload this Notification in the Hooghly District official web portal.
- 18-35) The Sabhapati, _____ Panchayat Samiti, Hooghly (All).
- 36-53) The Executive Officer, _____ Panchayat Samiti, Hooghly (All) with a request to hang this Notification in the Panchayat Samiti Notice Board.
- 54) O.S, Hooghly Zilla Parishad with a request to hang this Notification in the Zilla Parishad Notice Board.
- 55) DIA, Hooghly Zilla Parishad with a request to upload this Notification in the Hooghly Zilla Parishad web portal i.e. www.hooghlyzp.org.
- 6-262) The Pradhan, _____ Gram Panchayat, Hooghly (All) with a request to hang this Notification in the Gram Panchayat Notice Board.
- 263) The CA to the Hon'ble Sabhadhipati, Hooghly Zilla Parishad.
- 264) The CA to the District Magistrate, Hooghly.
- 265) The CA to the Additional District Magistrate (ZP), Hooghly.
- 266) The CA to the Additional District Magistrate (Gen), Hooghly.
- 267) The CA to the Additional District Magistrate (Dev), Hooghly.
- 268) The CA to the Additional District Magistrate (LR), Hooghly.
- 269) The CA to the Secretary, Hooghly Zilla Parishad.


Additional District Magistrate, Hooghly
&
Additional Executive Officer
Hooghly Zilla Parishad

Format for NHM (AYUSH) HMO

Annexure-I

Application Format

To
The Block Development Officer
_____ Block
_____ District

Sir/Madam,

Understanding from the advertisement published in the Patrika Dated and from the Notification No..... Dated....., I offer myself as a candidate for engagement as part-time Medical Officer (under NHM, AYUSH) of Gram Panchayat under Block of District. My particulars are given below:

- I. Name of the Candidate :
- II. Name of father/husband :
- III. Address mentioning of Block, Sub Division, District, Pin code and Telephone no. :
- IV. Whether he/she is a permanent resident of the Gram Panchayat for which applied for? (Yes/No) :
- V. Date of birth :
- VI. Category General/SC/ST) :
- VII. Nationality :
- VIII. Sex :
- IX. Educational Qualification in following Proforma :

Name of Exam	Year of Passing	% of marks obtained	Division/ Class/ Grade	Remarks if any
Higher Secondary				
Diploma				
Graduation				
Post Graduation				
Others				

- X. Work experience :

Declaration: I do hereby certify that the details stated above are true and that in case any information proves to be false, my candidature will be liable to be cancelled.

Date:

Place:

.....
Signature of the candidate

Format for Budget Head HMO

Annexure-I

Application Format

To
The Block Development Officer
..... Block.
..... District

Self attested
photograph

Sir/Madam,

Understanding from the advertisement published in the Patrika
Dated. and from the Notification No....., I
offer myself as a candidate for engagement as part time
(Homoeopathic/Ayurvedic) Medical Officer (under State Budget) of Gram
Panchayat underBlock of District. My
particulars are given below:

- I. Name of the candidate :
II. Name of father/husband :
III. Address mentioning of Block, Sub Division,
District, Pin code and Telephone no. :
IV. Whether a permanent resident of
the Gram Panchayat for which applied for?(Yes/No) :
V. Date of birth :
VI. Category (General/SC/ST/OBC) :
VII. Nationality :
VIII. Sex :
IX. Qualification in following Proforma :

Name of Exam	Year of Passing	% of marks obtained	Division/Class/Grade	Remarks if any
Higher Secondary				
BHMS/BAMS				
MD(if any)				

- X. Work experience :
XI. Whether attached with any Govt. service(Yes/No) :

Declaration: I do hereby certify that the details stated above are true and that in case any information proves to be false, my candidature will be liable to be cancelled.

Enclosed: Required papers to be submitted as per notification.

Date:

Place:

.....
signature of the candidate