

South 24 Parganas , District Health & Family Welfare Samity
(Office of the Chief Medical Officer of Health)
Administrative Building. M.R.Bangur Hospital Complex (2 " Floor)
241, Deshapran Sashmal Road. Tollygunge, Kolkata - 700033. W.B.

Memo No : CMOH(SPG)/DH&FWS/ 5790

Date: 11.06.19

SELECTION of TRAINEE ANMs for UPHCs of the ULBs under NUHM- Phase 2

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

Eligible female candidates should apply in the prescribed Pro-forma (Annexure—1) within 26.06.2019 for the mentioned posts as per the instruction issued by the Mission Director, NHM (Memo no. HFW/NUHM- 232/2016/1927, dated 07.06.19). Application forms not properly filled in or incomplete application forms are liable to be cancelled.

Total No. of Seats for the ANM Trainees in different Municipalities (ULBs) under South 24 Parganas are as noted below :

SL No.	Municipalities (ULBs)	ANM Trainees	UR	SC	ST	OBC-A	OBC-B
1	Baruipur	1	1	0	0	0	0
2	Maheshtala	12	6	3	1	1	1
3	Rajpur Sonarpur	4	1	1	1	1	0
Total		17	8	4	2	2	1

Details information regarding eligibility criteria, educational qualifications, score calculation, age, marital status, reservation status and application procedure would be followed as per the instruction given in the order no. Memo no. HFW/NUHM- 232/2016/1927, dated 07.06.19 attached here with.

Application must be sent by registered post / speed post / by hand only. Last date of receiving applications is 26th June, 2019. Application(s) will not be entertained if sent by any other mode or if it reaches after scheduled receiving date i.e. 26th June, 2019. The applications should be accompanied with self-attested photocopies of the documents mentioned in the departmental guideline attached below.

Address for sending application with relevant documents

To:
The Secretary,
DH & FW Samiti and C.M.O.H, South 24 Parganas,
Administrative Building. M.R.Bangur Hospital Complex (2nd Floor),
241, Deshapran Sashmal Road. Tollygunge, Kolkata - 700033. W.B

Applicant must mention " TRAINEE ANM " , ULB's name, Name of the Candidate, and Caste category in front of the envelope.

Applicants are requested to visit www.wbhealth.gov.in at the URL "Recruitment" for details and other notice etc. will be published in following websites www.spghealthgov.in/ / www.s24pgs.gov.in for the further communication details. All are advised to keep visiting accordingly on regular basis to see the progress of recruitment process. No separate letter will be issued.

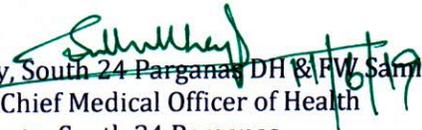

Secretary, South 24 Parganas DH & FW Samiti &
Chief Medical Officer of Health
B South 24 Parganas

Memo No : CMOH(SPG)/DH&FWS/ 5790/1 (10)

Date: 11.06.19

Copy forwarded for information

1. The Mission Director, NHM, West Bengal
2. The Executive Director, WB SH & FWS
3. The Chairman, District Recruitment Committee, South 24 parganas
4. The ADM(Development), South 24 Parganas
5. The OC Health, South 24 Parganas
6. The SNO (NUHM), West Bengal
7. The Chairman, Baruipur/Maheshtala /Rajpur Sonarpur - Municipalities
8. DIO, NIC , South 24 Parganas with request to upload the notice in www.s24pgs.gov.in web-site.
9. IT-Coordinator, Swasthya Bhavan with request to upload the notice in www.wbhealth.gov.in web—site.
10. DSM, South 24 Parganas with request to upload the notice in www.spghealthgov.in web-site.


Secretary, South 24 Parganas DH & FW Samiti &
Chief Medical Officer of Health
B South 24 Parganas

GOVERNMENT OF WEST BENGAL
HEALTH & FAMILY WELFARE DEPARTMENT
NATIONAL HEALTH MISSION (NHM)
GN -29, 1ST FLOOR, GRANTHAGAR BHAWAN,
SWASTHYA BHAWAN PREMISES, SECTOR -V
SALT LAKE, BIDHANNAGAR, KOLKATA - 700 091.

☎ 033 - 2357 - 7928, ☎ 033 - 2357 - 7930,

Email ID: spmu.nuhm@gmail.com; website: www.wbhealth.gov.in

HFW/NUHM-232/2016/ 1927

DATE: 07.06.2019

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 : 460

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.
- Age of the candidates should be between 25-35 years as on 01/1/2019. 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). In case of Kolkata, application will be submitted to Chief Municipal Health Officer (CMHO), Kolkata Municipal Corporation.
Applications send to the State Headquarters will not be considered and such application forms are liable to be cancelled.
- The applications 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 authorities as per State Govt. rules regarding competent authorities for issuing Residential/ Domicile Certificate.
 2. Age-proof (Admit card/ Certificate of Madhyamik Pariksha)
 3. Mark sheet of Higher 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 **26th June, 2019**. Application(s) will not be entertained if sent by any other mode or if it reaches after the scheduled receiving date i.e. **26th June, 2019**.
 - 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 concerned CMOH Office / KMC notice board 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.


Mission Director, NHM


Application for Admission to the ANM Training Course under NUHM

(Applied for.....UPHC)

To
The CMOH/CMHO
.....DistrictEnrolment No
(To be filled in by the receiving institution)

AFFIX PHOTO

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 01.1.2019) :
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(√) whichever applicable]
(If yes, detailed statement and documents in support of the statement)

12. Whether Physically handicapped/Not : Yes/No
[Please(√) whichever 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: