

Government of West Bengal
Directorate of Health Services
Nursing Branch
Swasthya Bhawan, 1st Floor, Wing-A
GN-29, Sector-V, Salt Lake City, Kolkata -91

Memo No.HNG/6S-48-79/Pt-V/KW/ 863

Dated, Kolkata, the10/07/2013

CIRCULAR

To
The Principal/Medical superintendent-cum-vice Principal/
Surgeon Superintendent/Chief Medical Officer of Health/
Superintendent/Principal Nursing Officer/Sr. Sister Tutor/
District public Health Nursing Officer/Nursing superintendent,

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In terms of Notification No. HF/O/GA (Ng)/95/HNG/3P-8-2010 dated Kolkata, 9th July, 2013 issued by the Jt. Secretary, Deptt. of Health & Family Welfare Govt. of West Bengal, it has since been decided that the number of Trainee Reserve during the year 2013-15 in following courses will be as follows:-

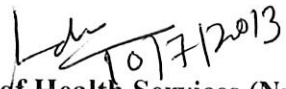
M.Sc. Nursing - 30
P.B.B.Sc. Nursing (Post Basic) – 341

Selection as Trainee Reserve will be strictly on the basis of merit, i.e. marks obtained in concerned Entrance Examination. Candidates should apply for obtaining **No Objection Certificate** in the prescribed format enclosed together with this.

The same is also available in the "Notice Section" of the web site of Department of Health and Family Welfare, West Bengal (www.wbhealth.gov.in).

Candidates are informed to submit their application for **No Objection Certificate** only for appearing counseling for the said course.

Complete and duly forwarded application for **No Objection Certificate** should reach to the office of the **Dy. Director of Health Services (Nursing), West Bengal, Swasthya Bhawan(1st Floor), Wing-'A', GN-29, Sector- V, Salt Lake City, Kolkata-700091** within 17.07.2013, preferably by hand.


Dy. Director of Health Services (Nursing)
West Bengal
Dated, Kolkata, the10/07/2013

Memo No.HNG/6S-48-79/Pt-V/KW/ 863/1(1)

Copy forwarded for information and necessary action to:

1. In-Charge I.T.Cell:- He is requested to publish this circular in web site:


Dy. Director of Health Services (Nursing)
West Bengal

Bio-data / Format for Application for No Objection Certificate

1. Name :
2. Designation with Grade :
3. Name of Father :
4. Name of Husband (if married) :
5. Address :
6. Date of Birth (Attested photo copy of Admit Card/Certificate of Madhyamik or equivalent exam. is to be enclosed) :
7. Age as on 30.06.2013 :
8. Whether SC/ST/PC (Attested Photo copy of documents to be enclosed) :
9. Religion :
10. Qualification (Attested photo copy of documents to be enclosed) :
 - a) Academic :
 - b) Professional (with session & year of passing)
 - i) G.N.M. :
 - ii) Neonatology Nursing :
 - iii) P.H.N. :
 - iv) D.H.E. :
 - v) B.Sc (Hons.) Nursing / B.Sc (Nursing)
P.B. B.Sc Nursing :
 - vi) Nurse Practitioner :
 - vii) M.Sc (Nursing) :
11. Registration Number of State Nursing Council & Year :
12. Date of appointment or promotion as Grade III / II/ I(ii) / & onwards :
13. Details of Service since appointment : From To Name of the Institution
(to be given in separate sheet) with Designation

14. Experience since completion of Training :
G.N.M./Neonatology Nursing/PHN/DHE/
B.Sc (Hons.) Nursing/B.Sc (Nursing)/P.B.B.Sc
Nursing/Nurse Practitioner/M.Sc (Ng.) & Other
15. Total Length of Service period upto 30.06.2013 :
16. Present place of posting :
16. (a) Copy of the Permission letter obtained from
Local Authority to be submitted. :
17. Rank in the Merit List (Both Combined & Category) :
18. Whether there is any unauthorized leave/disciplinary :
Proceedings/Court Case lying pending against her.
(A certificate is to be furnishing by the authority concerned)
19. Name of the Course & Session in which Admission is
Sought for
20. Declaration of the incumbent : The particulars mentioned above by me are true.

Signature of the applicant
Designation
Date
Contact No.

Certificate of Local Authority :

Information and particulars furnished by the applicant are verified from her Service Book and are found correct.

Forwarded and recommended to DDHS (Nsg.) for taking further necessary action.

Signature of the Local Authority

Date -

Seal -