

Government of West Bengal
Department of Health & Family Welfare
M. A. Branch
Swasthya Bhavan, GN-29, Sector-V
Salt Lake City, Kolkata-700 091

No.HF/0/MA/244/4D-01/2009 Pt.,

Dated, Kolkata, the 11th February, 2014.


From : The OSD & E.O. Jt. Secretary to the Government of West Bengal;

To : The Director of Health Services, West Bengal.

Sub. : Temporary deputation of Muslim doctor and para medical staff (Allopathic) to Consulate General of India, Jeddah, Saudi Arabia of Haj-2014.

In forwarding herewith a copy of the Memorandum No. M(Haj)/1183/03/2014 dated 15.01.2014 alongwith its enclosure received from the Ministry of External Affairs (Haj Cell), New Delhi on the subject noted above, the undersigned is directed to request to send the names of suitable Muslim doctors and para medical personnel (Allopathic) in terms and conditions as laid down in the Ministry of Externals memorandum under reference to the undersigned alongwith their original application by 7th March, 2014.

2. Prescribed form is enclosed at Annexure-'B'.
3. No application / request for extension of last date of receiving will be entertained.


O.S.D. & E.O. Joint Secretary.

No.HF/0/MA/244/4D-01/2009 Pt./1(100), Dated, Kolkata, the 11th February, 2014.

Copy forwarded for information and necessary action to :-

- 1) The Director of Medical Education, West Bengal;
- 2-3) The Dy. Director of Health Services (Admn.)/Nursing, West Bengal;
- 4-5) The Assistant Director of Health Services (P&E)/ (Admn.), West Bengal;
- 6-10) The Director, IPGME&R, Kolkata/STM, Kolkata/BIN&P, Kolkata/RIO, Kolkata/Pasteur Institute, Kolkata;
- 11) The Surgeon-Superintendent, Gandhi Memorial Hospital, Kalyani, Nadia;
- 12-20) The Medical Superintendent-cum-Vice Principal,
-
- 21-40) The Chief Medical Officer of Health,
- 41-99) The Superintendent,
- 100) Guard File.


O.S.D. & E.O. Joint Secretary.

kdi-(Misc.)



No. M (Hajj)/1183/03/2014
Government of India
Ministry of External Affairs
(Hajj Cell)

New Delhi, January 15, 2014

OFFICE MEMORANDUM

The undersigned is directed to state that the Ministry of External Affairs hereby invites applications from Muslim doctors and paramedical staff (Officers from Central or State Government/PSUs/Autonomous bodies) for temporary deputation to Consulate General of India, Jeddah, Saudi Arabia, to render medical assistance as Doctors and Paramedics (Allopathic) for Hajj—2014. The period of deputation will be 2-3 months.

2. The eligibility criteria and other terms and conditions are at Annexure "A". Applications from eligible candidates must be routed through proper channel.
3. The prescribed application form is at Annexure "B".
4. Applicants are required to send six passport size photographs with white background along with their application. Copies of passport form and visa form are given at Annexure 'C' and 'D' for use by selected candidates.
5. The selected candidates should apply for official passports to their concerned Regional Passport Offices (RPO). Details of RPOs are available at website: <http://passport.gov.in/>.
6. The details can be accessed on the website of this Ministry (www.mea.gov.in) and Hajj Committee of India (www.hajjcommittee.com).
7. The selection of candidates will be done on the basis of length of their service and experience and desirable qualifications such as, knowledge of regional languages, experience in public relations, etc. Ministry's decision on selection of suitable candidates shall be final.
8. Applications, duly forwarded by Directorate of Health Services of the concerned State may be sent at following address: Hajj Cell, Ministry of External Affairs, ISIL Building, Bhagwandas Road, New Delhi-01. (The Cadre Controlling Authority may please ensure that a separate certificate duly signed is attached to each application verifying the information given in column 5, 6, 7, & 10 of the application).
9. The last date for receipt of applications in the Ministry is **March 14, 2014**. Health Departments of all State Governments are requested to ensure that the applications are received in the Ministry on or before the last date. **Applications received after the due date will not be considered.**


(Deputy Secretary to the Government of India)
Email: dirhaj@mea.gov.in

1. Chief Secretaries of all States and Union Territories.
2. Health Secretaries, All States & Union Territories
3. Ministry of Health & Family Welfare, Nirman Bhawan, New Delhi;
4. Director- General of Health Services, Nirman Bhawan, New Delhi;
5. Secretary, Railway Board, Rail Bhawan, New Delhi;
6. Ministries of Home Affairs/Communication/ Labour /Defence, New Delhi

Copy for information to:

1. Embassy of India, Riyadh;
2. CGI, Jeddah;
3. DS(FSP) & US(PF), MEA, New Delhi;
4. CEO, Haj Committee of India, Mumbai and all State Haj Committees.

Ministry of External Affairs
(Hajj Cell)

**Eligibility Criteria and Terms and Conditions for Temporary Deputation of
Doctors and Para-medical staff to Consulate General of India, Jeddah,
Saudi Arabia for Hajj – 2014**

NOTE: All applications should be sent through Directorate of Health Services of the concerned State. Applications sent directly will be rejected. Attention of applicants is also invited toward Clause 20 of the CCS (Conduct Rules), 1964 which says, "No Government servant shall bring or attempt to bring any political or other outside influence to bear upon any superior authority to further his interests in respect of matters pertaining to his service under Government." Ministry may initiate disciplinary action against such applicants who violate the above-mentioned clause.

A) CATEGORY "NEED NOT APPLY"

- Doctors holding senior posts or working as Professors/Readers, Medical Superintendents/Deputy Medical Superintendents etc. need not apply. Anesthetists, Microbiologists also need not apply. Unani, Ayurveda and Homeopathic doctors also need not apply.
- Auxiliary Nurses/Midwives need not apply.
- Applicants who have been deputed thrice or more in the past are not eligible. This condition does not apply to Doctors and female Pharmacists.

B) Eligibility Conditions:

For Doctors:

- The applicant should be presently serving in a Central or State Government /PSUs/Autonomous bodies and should have a minimum of three years' experience as Medical Officer. However, in case the number of applicants having minimum 3 years of experience is not sufficient, then applicants with a minimum of 2 years experience may also be considered. Preference will be given to Doctors working as Medical Officers.
- **Only Allopathic Doctors** : General Practitioners (Minimum qualification MBBS), Specialists, Physicians, Surgeons, Orthopedics, Gynecologists, ENT Surgeon, TB & Chest, Psychiatrist, Pathologists, Ophthalmologists, Pediatricians, Dermatologists, Dentists and Cardiologists need apply.
- The applicants should not be more than **55 years** of age as on **01.07.2014** (Applicant must attach Matriculation Certificate in support of DOB).

For Paramedics:

- Applicant should be in possession of Degree/Diploma in Nursing/ECG/Lab. Technician. The applicant should be presently serving in a Central or State Government/PSUs/Autonomous bodies and should have a minimum five years' service.
- Pharmacists should be in possession of B. Pharma Degree/Diploma.
- The applicant should not be more than **55** years of age as on **01.07.2014** (Applicant must attach Matriculation Certificate in support of DOB).
- The applicant must be physically fit and able to withstand the harsh climate and living conditions and the long duty hours in Saudi Arabia.
- The applicant should hold a permanent post in his/her cadre.

C) Desirable Qualifications:

- Due weightage will be given to applicants having knowledge of Arabic and regional languages.
- Due weightage will also be given to the specialists such as Cardiologists, Gynecologists, ENT Specialists and Physicians. However, Professors, Directors of Hospitals and persons holding senior positions, need not apply. Anesthetists, Microbiologists also need not apply.

D) Pay & Allowances:

- During the deputation period, Basic Pay, HRA & CCA and Foreign Allowance as admissible to India-based staff of equivalent rank in CGI, Jeddah will be paid by CGI, Jeddah.
- No Daily Allowance would be admissible for the period of deputation at CGI, Jeddah.
- Economy class air ticket to and from Jeddah would be provided to the deputationists.
- The selected candidates will be entitled to normal baggage allowance of 20 Kgs.
- Accommodation would be provided on sharing basis to the deputationists.
- The officials selected will be entitled for eight days' preparation/joining time before departure. No joining/preparation time is admissible on return from deputation.
- No conveyance allowance would be paid for completing various formalities in Delhi.
- Expenditure on account of to and fro air travel to Jeddah will be borne by the Ministry of External Affairs.
- Expenditure on account of salary, preparation time and accommodation in Saudi Arabia during the deputation period will be borne by the CGI, Jeddah.

E) Deployment and Duties of the Deputationists:

- The deputationists will be deployed by Consulate General of India, Jeddah, at various Branch offices in Makkah and Madinah, Haj Terminal at Jeddah, Camps at Mina & Arafat, etc to render medical assistance to Indian Haj pilgrims.
- They would function under the day-to-day direction and overall supervision of the Consul General of India, Jeddah.
- The selected deputationists will be deemed to be on 24 hours duty during the entire period of deputation. They will be allocated tasks for specified duration depending on exigencies.

F) General Conditions:

- If the selected candidate does not report in Hajj Cell within time stipulated by the Ministry, the next candidate in the waiting list would be given chance without serving any notice to the non-reporting candidate.
- If any information given by the candidate is found wrong at any stage, the candidate will be banned for ever. The department concerned shall be asked to appropriate disciplinary action against the candidate.
- The selected officials will not be allowed to take any of their family members, including spouse, even at their own cost.
- **The selected doctors and paramedics must carry their own Stethoscopes and White Aprons.**
- The deputationists are not allowed to interact with the media. Violation of this condition will result in immediate recall and disciplinary action.
- **The deputationists should always be in civilian clothes.**
- **The services of the deputationists will be at the disposal of the Consulate General of India, Jeddah during their deputation.**
- Failure to perform duties assigned to the deputationists satisfactorily could lead to immediate repatriation to India and disciplinary action, including partial or full recovery of the Government money spent on his/her deputation.
- It may be noted that deputationists are deemed to be on 24 hours duty without any weekly off and therefore they are expected to work for extra-long hours especially during the core Haj Period. No repeat No extra remuneration or compensation will be payable except the normal admissible Foreign Allowance.

**MEDICAL MISSION
ONLY THROUGH PROPER CHANNEL**

Ministry of External Affairs
(Hajj Cell)

Prescribed Application Form for Temporary Deputation to Saudi Arabia in the Indian Medical Mission for Hajj -2014. Applications should be sent through proper channel along-with the enclosed Certificate duly signed. Applications sent directly or without the certificate from the Cadre Controlling Authority, will be rejected. Application should be typed or handwritten in Block letters Only. All columns need to be filled completely. Incomplete application will be rejected.

Sl. No.			Affix your Latest Photograph
1	Name		
2	Father's Name		
3 (a)	Designation		
(b)	Official Address (including Phone No.)		
4 (a)	Post presently held		
(b)	Temp/Permanent		
5 (a)	Date of Birth (attach Matriculation certificate, duly attested)		
(b)	Age as on 01.07.2014		
6	Pay scale & present basic pay		
7	Date of joining the Service		
8	Professional Qualifications		
9	Specialization in the field of		
10	Details of all previous deputations to CGI, Jeddah in Indian Medical Mission-with name of the post and number of posting		

11	Languages Known (other than Arabic) READ (R) WRITE (W) SPEAK (S) (Please tick)	(1)			(2)			(3)			(4)		
		R	W	S	R	W	S	R	W	S	R	W	S
12	Mother tongue												
13	Knowledge of Arabic												
14	Permanent home address												
15	Present/Mailing address												
16	Contact Details	(Off) (Res) Fax Mobile											
17	E-mail id (Applicant must have a valid email id)												
18	Name of nearest Passport Office												
19	Any other information												

Certificate

I hereby certify that the information given above is complete and true. I have carefully read the terms & conditions and undertake to abide by them during my deputation to Consulate General of India, Jeddah (Saudi Arabia).

I also certify that I do not suffer from any heart ailment, hypertension, diabetes and asthma.

I undertake that I shall not accept any remuneration from pilgrims for the service rendered to them.

I also undertake that during the period of deputation, I shall not perform Hajj pilgrimage.

Date.....

Signature of the applicant

Caution:

i) Any information regarding number of earlier deputations and Date of Birth suppressed or falsely given will render the applicant liable to disciplinary action besides rejection of his application.

ii) Incomplete application is liable to be rejected.

iii) The applicant shall be liable to disciplinary action under the relevant provisions of CCS (CCA)/ Conduct Rules if information in Col. 4 to 10 is found incorrect.

iv) Necessary entries regarding deputation should be made in the Service Book of the concerned official.

v) Attention of applicants is also invited toward Clause 20 of the CCS (Conduct Rules), 1964 which says, "No Government servant shall bring or attempt to bring any political or other outside influence to bear upon any superior authority to further his interests in respect of matters pertaining to his service under Government." Ministry may initiate disciplinary action against applicants who violate the above-mentioned clause.

(Enclosure to Annexure 'B')

**CERTIFICATE TO BE FURNISHED BY THE CADRE CONTROLLING
AUTHORITY ON ITS LETTER-HEAD IN THE PRESCRIBE FORMAT (IN BLOCK
LETTERS ONLY)**

Certified that as per entries made in the Service book of
Dr./Mr./Ms. _____

His/Her date of Birth is _____ His/Her designation
is _____ He/She joined
Government /PSU/Autonomous body service on _____
He/She is permanent / temporary officer in the pay scale of Rs _____

and has been on deputation to Saudi Arabia; in the year:-

(1) _____ (2) _____ (3) _____

More than thrice/Never.

He/She is eligible for short term deputation as _____
to Consulate General of India, Jeddah. No disciplinary action is pending against
him/her.

Signature _____

Name & Designation _____

With Seal _____

Tel. No. (with STD code) _____

Fax No. (with STD code) _____

E-mail address _____

**(The Controlling authority will be held responsible if the information
furnished is found incorrect.)**



Government of India
Ministry of External Affairs
Application For The Issue of A Diplomatic / Official
Passport

Effective from 1st Jan. 2007

	← Signature	Signature →	
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Paste your unsigned recent colour photograph (size: 3.5 X 3.5 cm, not in uniform) & attach another photograph duly attested at the back

(Thumb Impression in case of child below 5 years (Left in case of a male and right in case of a female)
 All entries should be in Block letters written with black ball point pen. Only one application is required with two photographs. Child above 5 years of age or above is required to sign. It is mandatory to fill each item. Incomplete form will be rejected summarily.

1. Name of applicant as should appear in the Passport. (Initials/Shri/Smt/Late etc are not allowed.)

Surname	
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Given Name	
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Note: Surname and Name must be indicated in separate rows. In case the applicant does not want to specify surname separately, then please strike out the surname row and write name in normal order against the given name row.

(Please attach photocopy of the applicant/forwarding officer's Identity Card)

2. Gender: Male Female

3. Date of Birth: DD MM YYYY

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4. Place of Birth: Village / Town

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District, State / Country

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5. Father's Name (First Name-Middle Name-Surname, in this order) (Initials/Shri/Smt/Late not allowed)

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6. Mother's Name (First Name-Middle Name-Surname, in this order) (Initials/Shri/Smt/Late not allowed)

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7. Name of Spouse (First Name-Middle Name- Surname; in this order) (Initials/Shri/Smt./Late not allowed)

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8. Present Residential Address, including Street No. with PIN code

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Telephone No.

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 Mobile No.

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9. Permanent Address with PIN code (if the permanent address is same as the present address write "Same" only)

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10. Details of previous passport(s) held or applied for (if any). Attach extra sheet for more than one passport)

Passport No.

Date of Issue DD MM YYYY

Place of Issue

11.

Countries to be visited on official Duty	Countries to be transited	Purpose and duration of visit

Date (Signature of the applicant or parent in case of minor)
 Place

CERTIFICATE

12. (a) I hereby certify that Shri/Smt./Kumari _____ is proceeding abroad on official duty as indicated in item 12 above.

(b) I hereby certify that Shri/Smt./Kumari _____ is Wife/ Son/ Daughter/Parent/Domestic Help of _____ who is going abroad on official duty as indicated in item 12 above.

13. Are you working in PSU/Autonomous Bodies (Yes)/(No)

Strike out whichever is not applicable

14. Pay scale & grade pay of the officer is Rs.

[Signature of Head of Office]

Instructions:-

- All entries should be in Block letters written with black ball point pen. Only one application is required with two photographs. Child above 5 years of age or above is required to sign. It is mandatory to fill each item. Incomplete form will not be accepted.
- Please enclose original safe custody Certificate of Valid Ordinary Passport (if held) from your office. If Diplomatic/official passport previously held by the applicant was kept in the safe custody of the Ministry of External Affairs, the original certificate should be enclosed.
- Official/Diplomatic/Ordinary passport which is around 10 years old or more (from the date of issue) must be submitted with the application for cancellation.
- Official retiring in less than six months from the date of application, is required to give an undertaking from his/her office that he/she will surrender dip./off. passport to his/her office immediately after return.



سفارة المملكة العربية السعودية
القسم القنصلي
EMBASSY OF SAUDI ARABIA
CONSULAR SECTION

This is a standard form for the issue of visas to foreign nationals. It is to be filled in by the applicant or his/her representative. The passport must be presented for inspection. The validity of the visa is subject to the prevailing regulations. The passport must be valid for at least six months from the date of issue of the visa. The fee for the visa is payable in advance. The visa is issued for a specific purpose and duration. The holder of the visa must comply with the laws and regulations of the Kingdom of Saudi Arabia.

Full name: _____ الاسم الكامل
 Mother's name: _____ اسم الأم
 Date of birth: _____ تاريخ الولادة Place of birth: _____ محل الولادة
 Previous nationality: _____ الجنسية السابقة Present nationality: _____ الجنسية الحالية
 Sex: Female Male الجنس: أنثى ذكر Marital Status: _____ الحالة الاجتماعية
 Religion: _____ الديانة
 Place of issue: _____ محل الإصدار Qualification: _____ المؤهل التعليمي Profession: _____ المهنة
 Home address and telephone No.: _____ عنوان المنزل ورقم الهاتف
 Business address and telephone No.: _____ عنوان الشركة (المؤسسة) ورقم الهاتف
 Purpose of travel: Work Transit Visit Umrah Pilgrimage Hajj Diplomacy الغاية من السفر
 Place of issue: _____ محل الإصدار Date passport issued: _____ تاريخ الإصدار Passport No.: _____ رقم الجواز
 Date of passport's expiry: _____ تاريخ انتهاء صلاحية الجواز
 Duration of stay in the Kingdom: _____ مدة الإقامة بالمملكة Date of arrival: _____ تاريخ الوصول Date of departure: _____ تاريخ المغادرة
 Mode of Payment: () Free () Cash () Cheque No. _____ تاريخ () بئسك رقم () نقد () عملة () بطاقة () No. _____ طريقة الدفع () مجاني () نقدي () شيك رقم () بطاقة () رقم
 Relationship: _____ صلة
 Destination: _____ وجه الوصول بالمملكة Carrier's name: _____ اسم الشركة الناقلة

Dependents travelling in the same passport: _____ إيفادات تهمس لقرابة العائلة (المهاجرين) على نفس جواز السفر:

Relationship نوع الصلة	Date of Birth تاريخ الميلاد	Sex الجنس	Full name الاسم بالكامل

Name and address of company or individual in the Kingdom: _____ اسم وعنوان الشركة أو اسم الشخص وعنوانه بالمملكة:

The undersigned hereby certify that all the information I have provided is correct. I will abide by the laws of the Kingdom during the period of my residence in it. _____ أنا الموقع أدناه أقدم كل المعلومات التي عنها أطلبها وتصحة وتصحة وأنا أقدم وتصحة بالمراتب المملكة أثناء فترة إقامتي بها.

Date: _____ التاريخ Signature: _____ التوقيع Name: _____ الاسم

For official use only: _____ للاستعمال الرسمي فقط:

Date: _____ التاريخ Authorization: _____ رقم الأمر الممنوح عليه أن إعطاء التأشيرة

Visit / Work for: _____ لزيارة / العمل لدى: _____

Date: _____ التاريخ Visa No.: _____ أتره برقم: _____

FEE COLLECTED: _____ المدفوع Type: _____ نوعها: _____ Duration: _____ مدتها: _____

القسم القنصلي مدقق البيانات