

Office of the Municipal Councillors

English Bazar Municipality, Malda

Netaji Subash Road, Malda, PIN-732101 Detailed advertisement of Honorary Health Workers H.H.W

Memo no. 3276 7111 211 23-24

Date: 08,01,2024

Applications are invited from the eligible women candidates (Married/Divorced/Widow) who must be a resident of this municipality area to fill up the vacancies of the post of Honorary Health Workers (HHW) as per terms and conditions stated below:

- 1. Name of the Post: Honorary Health Worker (HHW)
- 2. No. of Vacancy: 16
- 3. Age: As on 01.01.2024; 30-40 years for General category, candidates belong to SC/ST/OBC (A/B) age is between 22-40 years.
- 4. Candidate must be the resident of this Municipality area.
- 5. Since it is an honorary engagement, not a regular or contract engagement, 100 point roster is not applicable.
- 6. Educational qualification: Minimum Madhyamik pass or equivalent examination. Candidates having higher qualification can also apply. Marks obtained in Madhyamik or equivalent examination will be considered. For calculation of the marks obtained in the Secondary Examination (Madhyamik or equivalent), the aggregate is to be considered (excluding the marks obtained in the additional paper).

7. Terms & Condition:

- o Monthly honorarium of the HHW will be Rs. 4,500-(Rupees Four Thousand Five Hundred only) per month.
- The HHW shall be engaged on contract initially for a period of 1 (one) year on probation from the date of joining of each HHW and shall be extended further on the basis of satisfactory performance and on obtaining approval for extension from the UD & MA Department.
- The candidates will have to apply in the prescribed Application Format. Application Format is to be downloaded from the Website of this office: www.malda.gov.in
- O Document to be attached with application: 1. Proof of marital status (Candidate are to enclose self-attested copy of Marriage Certificate / Voter Card/Ration Card Aadhaar Card mentioning the husband name for married candidates, Death Certificate of husband for widows and Order of Hon'ble Court order for divorce, if any for divorcees), 2. Self-attested copy of proof of Age (Madhyamik Admit card), 3. Proof of residence (Aadhaar Card/Voter ID/Ration Card), Mark sheet of Madhyamik or equivalent examination as applicable. 4. Proof of caste, as per certificate issued by the Sub Divisional Officer (Malda Sadar, Malda) if applicable.

- o All applications must be addressed to the Sub Divisional Officer and Chairperson of HHWs Selection Committee, English Bazar Municipality and to be submitted physically at the Municipal Office within working days at the designated drop box placed to the General Section.
- o Applications are invited from 09/01/2024 till 30/01/2024 within 5.00 PM. After that no application will be received or entertained,

8. The selection would be based on-

- o Eligible candidates to be called for interview in the ratio of 1:10 for every vacancy of HHW based on the marks obtained in the Madhyamik or equivalent examination.
- o Marks obtained by the candidate in the Madhyamik or equivalent examination (90% weightage).
- o Score in the interview (10% weightage)
- o Final merit list shall be prepared based on marks obtained by the candidate in the Madhyamik or equivalent examination and score secured in the interview taken together.
- 9. No TA/DA will be allowed to attend the interview.

Health Officer & Member Convener, HHW Recruitment Committee Englishbazar Municipality, Malda

Date 08,01,2021

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Copy forwarded for information to:

1. Chairman, English Bazar Municipality.

2. Vice Chairman, English Bazar Municipality.

- 3. Sub Divisional Officer & Chairperson HHW Recruitment Committee (Request to put up the engagement Notice in your Notice Board)
- 4. Chief Medical Officer of Health, Malda, (Request to put up the engagement Notice in your Notice Board)
- 5. ACMOH (Sadar) Member.
- 6. Executive Officer, English Bazar Municipality- Member.
- 7. Finance Officer, English Bazar Municipality-Member.
- 8. Head Clerk, English Bazar Municipality.
- 9. Nodal Officer, NUHM, English Bazar Municipality.
- 10. The CA to the District Magistrate, Malda.
- 11. The CA to the Additional District Magistrate (Dev.), Malda.

Health Officer & Member Convener, HHW Recruitment Committee Englishbazar Municipality, Malda



Application Form

Application No.

(For Office Use Only) PASTE (Do not Pin or Staple here). Paste recent pass port size colour photograph of size 3.5 cm X 3.5 cm. The PLEASE FILL UP THE APPLICATION IN CAPITAL LETTER IN (Except photograph Colour Signature in CAPITAL LETTER) should not be more than 3 months old. Advertisement No. 3267/VIII-II/23-24 Dated 08.01.2024 Please put your signature across the photograph. Application for the post of Honorary Health Worker (HHW) 1. Name (In Capital Letter): FIRST NAME: MIDDLE NAME: SURNAME: 2. Father's / Husband's Name (In Capital Letter) : 3) DATE OF BIRTH (DD/MM/YYYY) 4) Age as on 01/01/2024 Years Months 5) Marital Status (Tick in appropriate box): Married Divorced Widow 6) Nationality: 7) Address : 7.1. PERMANENT ADDRESS (In Capital Letter): P.O: Town / City: Municipality: Ward No: District: State: Pin code:

	DENCE (In Capital L	etter) :		
P.O:				
Town / City:				
Municipality:	Ward I	No:		
District:				
State:				
Pin Code:				
8) Contact Details : i. Mobile Number:				
			7	
ii. Residence :				
iii. E- mail id :				
9) Academic Qualification (Madhya	amik or equivalent an	d onwards):		
Sl. School/ Board/ University/ No. Institute	Degree/ Diploma	Year of passing	Duration	Percentage of marks obtained
10) Additional Qualification (If any)):			
10) Additional Qualification (If any)):			
10) Additional Qualification (If any)):			
10) Additional Qualification (If any)):			
10) Additional Qualification (If any)):			
10) Additional Qualification (If any) 11) Extra Curriculum Activities (If a				

12) Language Known: (PLEASE TICK V	12)	Language	Known:	(PLEASE TICK V)
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Language	WRITING	READING	SPEAKING
W. 1			
	Language	Language WRITING	Language WRITING READING

13) Check List of documents: (PLEASE TICK √ IN THE BOX)

SI. No.	Documents	Y/N	No. of documents enclosed (Photocopies)
1.	Proof of age (Madhyamik Admit card)		
2.	Proof of Academic Qualification		
3.	Proof of residence (Aadhaar Card/Voter Card/Ration Card)		
4.	Caste Certificate		
5.	Others i) For married candidate – Marriage Certificate / Voter Card / Ration Card / Aadhaar Card mentioning the husband name ii) For widow candidate – Death Certificate of husband iii) For divorced candidate – Court order for divorced, if any		

Declaration:

I hereby declare that I have carefully read the conditions of eligibility mentioned in the advertisement. These conditions are acceptable to me and I fulfill these conditions. The details mentioned in the Application are true and I shall furnish the necessary documents in original whenever required.

If any information/ details found to be incorrect / false at any stage of the selection process or if

engagement likely to be terminated.	ven after the appointment, my
Date:	
Place:	Full Signature of the Candidate