



Government of West Bengal
Department of Health & Family Welfare
Office of the Principal
Midnapore Medical College, Paschim Medinipur, 721101.
☎:- 03222-222400 Fax:-03222-274321

✉:- formcimidnapore@gmail.com/ prin_midmch@wbhealth.gov.in

No. - MMC/ 2862

Date: 22/11/2024

RECRUITMENT NOTICE

In exercise of the power conferred vide e file no. HFW-42011(99)/58/2023-MC Sec. and on behalf of the Govt. of West Bengal, the undersigned invites application from the eligible willing candidates for recruitment for the post of " **DOME / Dissection hall attendant**" (Regular) for **the department of Anatomy, MMC, Paschim Medinipur.**

Last date of submission of application is **31.12.2024 up to 02.00 p.m.**(application format Enclosed) and application must be reach by **Speed Post** only in a sealed envelope to the office of the undersigned by **31.12.2024 up to 02.00 p.m.**

For further details see the websites of <https://www.wbhealth.gov.in> and <https://midnaporemcc.ac.in>

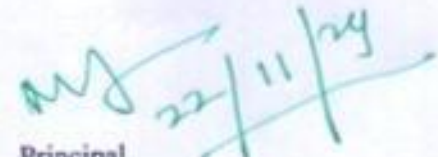
Details are as follow.

1. No. of post: 03 (Three) (SC-1, UR-2)
2. Educational Qualification: Minimum **Class VIII** pass from any recognized School/ Board.
3. Pay: In the Pay Matrix Level-1 under WBS (ROPA) Rules, 2019 (Corresponding to the Pay Band Scale of Rs. 4900-16200/- of P.B-1 with Grade Pay of Rs. 1700/- under WBS (ROPA) Rules, 2009 plus usual allowances as admissible under Government Order issued from time to time.)
4. Experience: Minimum **01yrs. Working experience in the same type of work in Govt. Health Institution/Hospital.**
5. Age limit: **Not less than 18 yrs & Not more than 40 yrs.** as on **01.01.2025.** (Relaxation in Age is applicable for SC/ST/OBC candidates as per rule).
6. Resident: Applicant should be resident of West Bengal.
7. Application should be addressed to **The Principal, Midnapore Medical College, Paschim Medinipur. PO - Midnapur, Dist. - Paschim Medinipur, PIN-721101.**
8. **Application must be reached through Speed post or Registered post only.**
9. **Direct submission of Application will not be considered.**
10. **Applications received after the due date will not be considered.**
11. The name of the post should be superscripted in **CAPITAL letters** on the top of the envelope. Self attested photocopies of all relevant documents/testimonials i.e. copy of Voter Card/Aadhar card/Address prof/Pass certificate/Admit /Birth certificate /Caste certificate etc. must be attached with the application.

12. Application must be as per prescribed format only.

13. Decision of the recruitment committee is final.

14. Shortlisted name of the eligible candidate /Panel will be published latter on in the websites. <https://www.wbhealth.gov.in> and <https://midnaporemhc.ac.in> and office notice board.

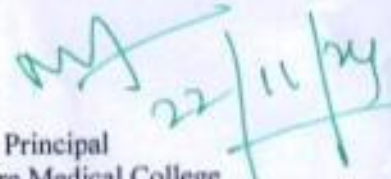

Principal
Midnapore Medical College
Paschim Medinipur

No. - MMC/2362/1(12)

Date-22/11/24

Copy forwarded for information & necessary action please:

1. The Principal Secretary, Dept of. Health & Family Welfare, Govt. of West Bengal.
2. The DME, Dept of. Health & Family Welfare, Swasthya Bhavan, Kol- 91.
3. The DHS, Dept of. Health & Family Welfare, Swasthya Bhavan, Kol- 91.
4. The CMOH, Paschim Medinipur.
5. The Accounts Officer, MMC , Paschim Medinipur.
6. In-charge IT cell, Dept of. Health & Family Welfare, Swasthya Bhavan, Kol- 91- for publication in the Department website.
7. Website of this Institute.
8. Notice board- for display.
9. Office file.


Principal
Midnapore Medical College
Paschim Medinipur

To
The Principal
Midnapore Medical College
Paschim Medinipur
Sir,

I the undersigned offer myself as eligible candidate to the post of **DOME** (Dissection Hall Attendent.) as per recruitment notice vide No. -

MMC/ **Date-** . My candidature is as follows.

(All INFORMATION TO BE FILLED IN BLOCK LETTERS)
(Strike out which is not applicable)

1 Name			With Passport size Colour Photo 27mm
2 Father's Name			
3 DOB(DD/MM/YYYY)	Age on 01/01/2025		
4 Caste(SC/ST/OBC)	Certificate No.		
a Issuing Authority			
	Permanent Address	Present Address	
5 Vill			
6 PO			
7 PS			
8 Dist			
9 PIN			
10 Contact No(Mob)			

11	QUALIFICATIONS	Name of the Board/Council/University/	Passing year	Gross (with out Additional) /Best of Five	Marks Obtain	%

13 Experience	YEAR	MONTH	DAYS

a (Tenure) from _____ to _____

b Issued from (Organization)

NB: Self attested Xerox copy of the supporting documents Let PAN Card/Driving Licence/Voter Card/Bank Pass book(Front page) /Aadhar Card etc; must be enclose with the Application.

Declaration:

The above statement furnished are true to best of my knowledge and liable to cancelled if any information found fake.

(Full signature of the applicant with date)

MJ
22/11/24