

KOLKATA POLICE DIRECTORATE
18, Lal Bazar Street, Kolkata- 700 001.
Website: www.kolkatapolice.gov.in

Employment Notice No. FRC/ Recruit/11/2018

Date: 16/11/2018

**Ref: Govt. of West Bengal, Home & Hill Affairs Department, Police Establishment Branch
Order No. 5567 -PL/PA/1H-02/2009 Pt. I dated 14/11/2017.**

Notice for walk-in-interview for engaging in the following posts purely on contractual basis, the details of which are furnished below:

| SL No. | Name of the Posts | Number of Vacancies | Consolidated pay per Month (Rs.) |
|---------------|-----------------------------|----------------------------|---|
| 1. | M.O. (General Duty) | 04 | 40,000/- |
| 2. | Sister-in-Charge[Gr.-I(ii)] | 01 | 21,000/- |
| 3. | Nurse Gr.- II | 06 | 18,000/- |

2. TERMS OF ENGAGEMENT: Purely on contractual basis for a period of 01(one) year which may be extended further subject to the approval of the Govt. The contract of the engagement will be renewed in every 03 (three) months.

3. METHOD OF SELECTION

A. ELIGIBILITY FOR APPLICATION :

- (i) The applicant must be a citizen of India and should be a permanent resident of West Bengal.
- (ii) The age of the applicant at the time of engagement shall not normally exceed 50 years.
- (iii) The applicant must possess minimum Educational Qualification as follows:

| Sl. No. | Name of the Post | Minimum Qualification |
|----------------|-------------------------------|---|
| 1. | M.O. (General Duty) | MBBS. Should be registered with Medical Council of India/ West Bengal Medical Council. The candidate hails from other states should get registered with West Bengal Medical Council within 01 (one) month from his/ her date of engagement. |
| 2. | Sister-in-Charge [Gr. I (ii)] | B. Sc. Nursing. Should be registered as Nurse & Midwifery with West Bengal Nursing Council. |
| 3. | Staff Nurse Gr. II | General Nursing & Midwifery (GNM). Should be registered with West Bengal Nursing Council. |

- (iv) The applicant has to produce the original certificates in support of his educational qualification, age proof, Caste Certificate (if any), experience certificate, residential certificates, medical fitness certificate in original, 02 (two) copies of recent passport size colour photograph and any other documents in original in support of his/ her candidature during Walk-in-interview.

B. PROCEDURE OF SELECTION :-

1) Medical Officer (General Duty) : Selection Criteria

The preparation of merit list will be made based on academic records and professional experience.

2) Other Posts: Selection Criteria

The preparation of merit list will be made based on academic records.

Contd

3) Schedule of Interview:

| Name of the Posts | Date of Interview & Reporting Time | Venue |
|-----------------------------|---|--|
| M.O. (General Duty) | 26/11/2018 at 11.00 hrs. | Kolkata Police Hospital, 2, Beninandan Street, Kolkata - 700025. |
| Sister-in-Charge[Gr.-I(ii)] | 26/11/2018 at 11.30 hrs. | |
| Staff Nurse Gr.-II | | |

*** Any candidate reporting after the stipulated time will not be entertained.**

4) All the posts are in Kolkata Police Hospital, 2, Beninandan Street, Kolkata - 700025.

5) The contractual service condition will be as per existing rules and regulations of Govt. of West Bengal.

6) All efforts will be made to complete the selection process as per above mentioned schedule. However, in case of extreme unavoidable circumstances this date may be deferred and the same shall be communicated through Kolkata Police website www.kolkatapolice.gov.in and KPRB website www.kprb.kolkatapolice.gov.in.

7) Any clarification may be taken from Police Surgeon, Kolkata Police Hospital on (033) 2455-2704 during office hours.

Sd/-
for **Commissioner of Police,**
Kolkata.

**Application for the post of _____ purely on contractual basis in the
Kolkata Police Hospital under Kolkata Police.**

To
The Chairman,
Selection Board for selection of contractual staff
in Kolkata Police Hospital, Kolkata.

| |
|--|
| Space for pasting self attested recent passport size photograph (3.5cm x 3.5cm) |
|--|

| | | | |
|-----------------|----------------------|----------------------|----------------------|
| | First Name | Middle Name | Surname |
| 1. Name in full | <input type="text"/> | <input type="text"/> | <input type="text"/> |

| | | | | |
|------------------|----------------------|----------------------|----------------------|----------------------|
| | Shri/Late | First Name | Middle Name | Surname |
| 2. Father's Name | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

| | |
|---------------------------|----------------------|
| 3. Address Vill/ Street : | <input type="text"/> |
| P.O. : | <input type="text"/> |
| P.S. : | <input type="text"/> |
| Dist.: | <input type="text"/> |
| State: | <input type="text"/> |
| Pin : | <input type="text"/> |

| | | | |
|-------------------|----------------------|----------------------|----------------------|
| | Date | Month | Year |
| 4. Date of Birth: | <input type="text"/> | <input type="text"/> | <input type="text"/> |

| | |
|-----------------------------|----------------------|
| 5. Age as on 01.01.2018: | <input type="text"/> |
|-----------------------------|----------------------|

| | |
|---------|----------------------|
| 6. Sex: | <input type="text"/> |
|---------|----------------------|

| | |
|-----------------------|----------------------|
| 7. Whether SC/ST/OBC: | <input type="text"/> |
|-----------------------|----------------------|

| Sl No. | Examination Passed | Year | Board/ University | Division/ Class |
|---|----------------------|----------------------|----------------------|----------------------|
| 8. Educational Qualification starting from 10 th class onwards: | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

| | |
|--------------------------|----------------------|
| 9. Experiences, if any : | <input type="text"/> |
|--------------------------|----------------------|

| | |
|---------------------------|----------------------|
| 10. Publication, if any : | <input type="text"/> |
|---------------------------|----------------------|

I do hereby declare that the above particulars are true to the best of my knowledge and belief.

Date :
Place :

(Signature of the applicant)
Mob. No/Contact No:

Note :
Application form must be filled up in Block Capital Letters. If required additional sheet may be attached.