



Government of West Bengal
Office of the Director
Institute of Post Graduate Medical Education & Research
244, A. J. C. Bose Road, Kolkata -700 020
Email : director.ipgmer@gmail.com Phone : 2204-1101

Memo No: Inst. /5376

Dated, 01/09/ 2023.

Vacancy Notification

Application are invited from suitable candidates for filling up the 2 (two) posts of staff Nurse (one –SC & one-UR) on contractual basis as per 100 point roster of vacancy at the HCP for Thalassaemia Control Unit , Pathology Dept.of IPGME&R-SSKM Hospital.

Qualification : A) For Staff Nurse – Minimum completed GNM course recognised by Indian Nursing Council (INC)/West Bengal Nursing Council with experience in working with Thalassaemia patients and their families ,Age Limit (as on 1st January) Minimum -21 years &Maximum age required – 40 years. Monthly consolidated remuneration Rs. 25000/- per month.

Personal data Sheet (to be submitted in plain paper) :

i) Post applied for ii) Name of applicant iii) Guardian's Name iv) Date of Birth v) Address vi) Mobile No , vii) Mail Id viii) Education Qualification with % of marks and years of passing ix) Working Experience x) Category xi) Declaration xii) Photocopy of all documents with self attestation.

No TA/DA will be allowed for attending the interview etc.

Application with bio –data in details must be submitted within 25th September 2023 upto 1.00 p.m. to the receiving section of the Director Office, addressed to the office of the Director, IPGME&R, 244 ,A.J.C. Bose Road, Kolkata -700020

Applicants are directed to follow the official website "www.ipgmer.gov.in"


09/09/23
Director,
IPGME&R, Kol

Director
I.P.G.M.E. & R.
Kolkata-700020





Government of West Bengal
Office of the Director
Institute of Post Graduate Medical Education & Research
244, A. J. C. Bose Road, Kolkata -700 020
Email : director.ipgmer@gmail.com Phone : 2204-1101

Memo No: Inst. 15377

Dated, 11/09/23

NOTIFICATION

As per guideline of the Mission Director, NHM & Executive Director WBSH & FW Samiti Govt. of WB Dept. of H&FW , Swasthya Bhawan Kolkata -700091 with ref. to his letter no. H&FW-27025/2/2021/103(14) dt. 02.09.2021 regarding the recruitment of Contractual staff ---Staff Nurse in the HCP for Thalassaemia Control Unit., IPGME&R ,SSKM Hospital , Kolkata - 700020.

Sl No	Name of the post	Number of post	Consolidated Remuneration per month
1	Staff Nurse (Contractual)	02(two) (01-S.C. , 01-U.R.)	Rs. 25000/- per month

Qualification :

- A) **For staff Nurse** – a) Minimum qualification required -- Minimum completed GNM course recognised by Indian Nursing Council (INC)/West Bengal Nursing Council
- b) Desirable --Experience in working with Thalassaemia patients and their families /Age Limit (as on 1st January) Minimum -21 years &Maximum age required – 40 yearsMonthly consolidated remuneration Rs. 25000/- per month.

(contd.....P/2.)

Selection Procedure

1. For Staff Nurse (Contractual)

Selection will be made upon academic records and interview . No written test will be conducted.

Total marks -100

- i Marks in GNM examination – Maximum 60 Marks (Proportionate Marking that is % of obtained in the exam* 60/100)
- ii. For Class XII or equivalent – Maximum 25 marks (Proportionate Marking that is % of marks obtained in the exam* 25/100)
- iii. Interview – 15 Marks.

Application with bio –data in details must be submitted within 25th September 2023 upto 1.00 p.m. to the receiving section of the Director Office, addressed to the Office of the Director, IPGME&R, 244 ,A.J.C. Bose Road, Kolkata -700020 along with all testimonials with self attestation.

Statutory provision of Reservation :- 100 point roster will be followed as per rule.

Applicants are directed to follow the official website "www.ipgmer.gov.in"


Director,
IPGME&R, Kol
Director
I.P.G.M.E. & R.
Kolkata-700020

APPLICATION FORMAT

Post applied for:

Name :

Address:

Guardian's Name:

Phone No:

Mobile No:

Email No:

Education Qualification With % of Marks and Year of Passing:

Working Experince:

Registration Number with Details (for MBBS only):

Category:

Declaration of candidate:

.....

(Signature with Date)

Enclo: Photocopy of all documents with self attestation.

