



GOVERNMENT OF WEST BENGAL

Office of the Medical Superintendent Cum Vice Principal

Calcutta National Medical College & Hospital

24, Gorachand Road, Kolkata – 700014

Phone No. 2289-7122/ 7123 (ext. 101), Fax: 2289-7424

No. CNMCH/2024-25/3008

Date: 28-06-2024

Applications are being invited for engagement of 01 (one) Contractual “Peer support for NVHCP under NHM” in the office of the Medical Superintendent-cum-Vice Principal, Calcutta National Medical College & Hospital.

Name of Post	:	Peer Support
No. of Post	:	01 (one)
Place of Posting	:	Viral Hepatitis Treatment Centres at CNMC&H, Kolkata
Remuneration	:	Rs. 10,000/- p.m.
Opening date for the application	:	4th July, 2024
Closing date for the application	:	5:30 P.M. on 12th July, 2024

Complete application in the prescribed format along with the RELEVANT SELF ATTESTED SCANNED DOCUMENTS ONLY IN PDF FORMAT should be mailed to msvpofcnmch@gmail.com

Eligibility criteria:

1. **Qualification :**

- Should be a person preferably with or recovered from the Disease (Hepatitis B or Hepatitis C)
- Minimum Educational Qualification – Higher Secondary (10+2) or equivalent examination passed.
- Must be a permanent resident of West Bengal
- Must have sound knowledge of the local language and working knowledge of English

2. Age limit : Maximum 40 (forty) years as on 01/01/2024

3. Job Profile /

Responsibility :

- Has to work under the guidance and supervision of Nodal Officer / MO
- Be the first interface with patient at centre
- Ensuring entry in the Visit Register
- Providing psycho-social support to newly registered patients
- Providing assistance to the patients enrolled at the centre, within the hospital (OP and IP)
- Discussing the importance of adherence to the treatment and need of viral load at 12 weeks post treatment (SVR) with the patients for hepatitis C. Keeping track of drug adherence of the patients, counselling them on the importance of regularity of visit and timely investigations.
- Following up the patients and assist in patient retrieval, where necessary as far as possible
- Ensuring Data Entry and Report Return
- Any other duty related to the programme assigned by the Nodal Officer / MO

4. General Information :

- a) Only Indian Nationals are eligible to apply
- b) Candidates working in Government Organisation must route their application through proper channel if their departmental rules requires so and procedure NOC at the time of Interview.
- c) Excellent skills in oral and written expression and complete proficiency in computer operations for applicants is absolutely essential.
- d) Applications received after due date and time will be rejected outright.
- e) Only shortlisted candidates to be called for the interview.
- f) If the aggregate mark after final selection is equal then preference is to be given to the candidate inter se-senior in age as on the 1st date of the year of the publication of the advertisement.
- g) No TA/DA or other allowances will be paid to the candidate for interview or for joining the post.
- h) The decision of the Competent Authority regarding selection of the candidate will be final and no representations will be entertained in this regard in any circumstances.

5. Mode of Application :

Interested candidate may apply through e-mail to msvpofcnmch@gmail.com. Candidate should download the Application Form enclosed herewith and fill up the same in his own hand writing and after affixing the Passport size photograph at the designated space of the Application Form, the PDF copy of the Application Form along with all PDF copies of documents and testimonials are required be sent along with the Application Form to the above mentioned e-mail id within stipulated time.

Original Application Form and Original copies of all Documents and testimonials shall have to be submitted at the time of Interview.

Application Forms received without enclosing copies of documents and testimonials shall be rejected outright.

6. Mode of Selection :

Two stage selection process viz. 1. Screening of documents, 2. Interview
Final selection will be made on the basis of total marks obtained in Academic Qualification (weighted) and Interview.

Academic Qualification – 85 Marks

Class X – 40 Marks (Proportionate marking i.e. % obtained in the Examination excluding Additional or forth subject X 40/100)

Class XII – 45 Marks (Proportionate marking i.e. % obtained in the Examination excluding Additional or forth subject X 45/100)

Interview – 15 Marks

Total – 100 Marks

Medical Superintendent cum Vice Principal
Calcutta National Medical College & Hospital

Medical Supdt. cum-Vice-Principal
Calcutta National Medical College

& Hospital, Kolkata - 14
Date: 28-06-2024

No. CNMCH/2024-25/3008/1(5)

Copy forwarded for information and necessary action to:

1. Mission Director, NHM & Executive Director, WB SH & FW Samiti, Swasthya Bhawan
2. Programme Officer, NHM, Swasthya Bhawan
3. Principal, Calcutta National Medical College, 32, Gorachand Road, Kolkata – 14.
4. IT Cell, Swasthya Bhawan with the request to publish the Notice on Departmental website
5. Nodal Officer, NVHCP, Calcutta National Medical College & Hospital

Medical Superintendent cum Vice Principal
Calcutta National Medical College & Hospital

Medical Supdt. cum-Vice-Principal
Calcutta National Medical College
& Hospital, Kolkata - 14

APPLICATION FORM FOR THE POST PEER SUPPORT FOR NVHCP UNDER NHM

To
The Medical Superintendent-cum-Vice Principal,
Calcutta National Medical College & Hospital,
24, Gorachand Road,
Kolkata – 700 014.

Recent Passport size
colour photograph

Personal Details:

1. Name (in Block Letter) :
2. Address for communication :
3. Permanent address :
4. Mobile No. :
5. E-mail – id :
6. Father's / Husband's Name :
7. Gender :
8. Date of Birth :
9. Age as on 1st January, 2024 :
10. Nationality :

Educational Qualification :

Sl. No.	Exams. Passed	Board/University	Year of passing	% of Marks excluding Addl. Subject / forth paper

History of the suffering from the disease ((Hepatitis B or Hepatitis C) :
(Enclose copies of treatment undergone)

Declaration: I hereby declare that all the information given by me in this application is true and correct to the best of my knowledge and belief. I also note that if any of the above statements are found to be incorrect or false or any information particulars have been suppressed or omitted in this form, I am liable to be disqualified for requisite test or if selected my appointment will be cancelled without any compensation or notice.

Date: ____ / ____ / ____

(Full Signature of the Candidate)