



**Office of the Principal**  
College of Medicine & J.N.M Hospital  
West Bengal University of Health Sciences  
Kalyani, Nadia, West Bengal. Pin- 741235.  
Tele - Fax : (033) 2582 6647, (033)-2582 8562  
Email: [principal.comjnmh.kalyani@gmail.com](mailto:principal.comjnmh.kalyani@gmail.com)

No.: COMJNMH/PR/2018/2005

Date: 14/12/2018

**Advertisement Notice for Engagement of DOME on Contractual Basis in College of Medicine & J.N.M. Hospital, WBUHS, Kalyani, Nadia.**

Applications are invited from Mentally and Medically fit Citizens of India for the Post of Dome on purely Contractual Basis for College of Medicine & J.N.M. Hospital, WBUHS, Kalyani, Nadia.

Duly filled application forms should reach the "OFFICE OF THE PRINCIPAL, COLLEGE OF MEDICINE & J.N.M. HOSPITAL, WBUHS, KALYANI, NADIA, PIN - 741235" in a sealed envelope super scribed "Application for the Post of Dome". One self addressed envelope should be kept inside the main envelope for further communication from office end.

**Last Date of submission of application is 14/01/2019.**

**Terms and Conditions**

01.	<b>Number of Vacancies</b>	05 (Five)
02.	<b>Age</b>	18 Years to 60 Years
03.	<b>Educational Qualification</b>	Class Eight Pass
04.	<b>Remuneration</b>	Selected Candidate will be paid under the category of unskilled, Zone A, as mentioned in the Circular related to the Minimum wages issued by Office of the Labour Commissioner, Govt. of West Bengal.
05.	<b>Duration of Engagement</b>	For a period of 06 (Six) months, may be extended on satisfactory performance.
06.	<b>Place of Posting</b>	College of Medicine & J.N.M. Hospital, Kalyani, Nadia
07.	<b>Experience</b>	Minimum 02 years working experience as Dome in any sector
08.	<b>Mode of Selection</b>	Shortlisted candidates will have to appear before the interview board. Date and Time of interview will be intimated separately to each candidates through India Post. Notice about the date and time will be found in the website <a href="https://www.comjnmh.com">https://www.comjnmh.com</a>
09.	<b>Date of Interview</b>	Will be informed later after scrutiny of application forms



Contd.....p2.....

K. Mukhopadhyay  
14.12.18

**Principal**  
College of Medicine & J.N.M. Hospital  
WBUHS, Kalyani, Nadia

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No.: COMJNMH/PR/2018/ 2005/Q-xx)

Date: 14/12/2018

**Copy forwarded for information and necessary action to:-**

1. The Pro Vice Chancellor, The West Bengal University of Health Sciences, DD – 36, Sector I, Salt Lake, Kolkata – 700 064
2. The Registrar, The West Bengal University of Health Sciences, DD – 36, Sector I, Salt Lake, Kolkata – 700 064
3. The Registrar, Bidhan Chandra Krishi Viswavidyalaya
4. The Registrar, University of Kalyani
5. The Chairman, Kalyani Municipality
6. The Chairman, Gayeshpur Municipality
7. The District Magistrate, Nadia, Krishnagar
8. The Chief Medical Officer of Health, Nadia, Krishnagar
9. The Finance Officer, The West Bengal University of Health Sciences, DD – 36, Sector I, Salt Lake, Kolkata – 700 064
10. The Sub Divisional Officer, Kalyani, Nadia
11. The Medical Superintendent, College of Medicine & J.N.M. Hospital, WBUHS, Kalyani, Nadia
12. The Prof. & HOD, Department of Anatomy, College of Medicine & J.N.M. Hospital, WBUHS, Kalyani, Nadia
13. The Prof. & HOD, Department of FMT, College of Medicine & J.N.M. Hospital, WBUHS, Kalyani, Nadia
14. The ACMOH, Kalyani, Nadia
15. The Accounts Officer, College of Medicine & J.N.M. Hospital, WBUHS, Kalyani, Nadia (College wing)
16. The Accounts Officer, College of Medicine & J.N.M. Hospital, WBUHS, Kalyani, Nadia (Hospital wing)
17. The Accounts Officer, Gandhi Memorial Hospital, Kalyani, Nadia
18. P.A to the Hon'ble Vice Chancellor, The West Bengal University of Health Sciences, DD – 36, Sector I, Salt Lake, Kolkata – 700 064
19. Website Administrator for uploading the notice in the College website
20. Guard File.



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**APPLICATION FORMAT FOR THE POST OF DOME ON CONTRACTUAL BASIS**

1. Name of the Candidate in full : \_\_\_\_\_  
(In Block Letters)
2. Father's Name : \_\_\_\_\_
3. Date of Birth : \_\_\_\_\_
4. Age as on 01.01.2018 : \_\_\_\_\_
5. Gender : \_\_\_\_\_
6. Permanent Address : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. Correspondence Address : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
8. Email ID (if any) : \_\_\_\_\_
9. Mobile Number (Compulsory) : \_\_\_\_\_
10. Educational Qualification :

Insert  
Recent  
Passport  
Size  
Photograph

Examination Passed	Year of Passing	Board / Council / University	Div. / Grade

11. Work Experience : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby declare that all the statement made in this application are true and complete at the best of my knowledge and belief. I have not concealed any relevant information. I understand that action can be taken against me by the concerned authorities if I am declared by them to be guilty of any type of misconduct mentioned herein. I have informed my Head Office / Department in writing that I am applying for this selection (if still in employment) (Strike off if not applicable).

Place : \_\_\_\_\_  
Date : \_\_\_\_\_

.....  
[Signature of Candidate]