

**BABA EDUCATIONAL SOCIETY
INSTITUTE OF PARAMEDICAL
COLLEGE OF NURSING**

56, Matiyari Dewa Road Chinhat Lucknow, U.P

Students qualifying in State/ National/ International level
examinations during the last five years

S.No.	Name of the Students	Joining Year
1.	Shruti	2020
2.	Sapna Verma	2020
3.	Shwetaanjali Lakra	2020
4.	Shilpa Devi	2020
5.	Prachi Mishra	2020
6.	Sarita Chaudhary	2020
7.	Diksha Sachan	2020
8.	Shivani Lakra	2020
9.	Shalini Shukla	2019
10.	Sunita Sahani	2019
11.	Satyawati	2019
12.	Smt. Divya Patel	2019
13.	Yogita Singh	2019
14.	Neha Yadav	2019
15.	Apurva Srivastava	2019
16.	Madhulika Srivastava	2019
17.	Madhu Gupta	2019
18.	Jyoti Verma	2015
19.	Akhilesh Kumari	2015

Government Medical College, Saharanpur

Ambala Road, Saharanpur, U.P. Pin-247232, e-mail-smedicalcollegeab@gmail.com

Sl. No.: 159/2020

Issuing Date: 1/05/2020

Identity Card

Name : SHRUTI
Father's/Husband Name : KAILASH NATH BOSE
Address T-2, B-6, R-8, SMMH Medical
College, Saharanpur
Designation : Staff Nurse
Department :
Mob. No. : 7081817539
Validity : May 2020 to Apr 2021



प्रमाणित प्रमुख अधीक्षण स्वयंसेवक श्री मोहरा शिक्षणालय प्रयागराज
अधिसूचना-23/आकाशिक सेवाये



पिता- चिकित्सा विभाग
व्यक्ति का नाम- स्वप्ना वर्मा
पिता/पति का नाम- श्री अभिनव आनन्द
वय- नर्सिंग ट्यूटर
संलग्न नम्बर- 7880426794
संलग्न विभाग का पता - 12/F पैलडवियर कम्पाउन्ड प्रेस,
एलनमंज , प्रयागराज (उ.प्र.)
अधिकृत का नाम - UP32 JF 3006,
हस्ताक्षर- UP32 HX 8450

कोटा

प्रमाणित

प्रमुख अधीक्षण स्वयंसेवक
श्री मोहरा शिक्षणालय
प्रयागराज

अधिसूची हस्ताक्षर

Smalleramg
25-03-20

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कार्यालय मुख्य चिकित्सा अधिकारी, बुलन्दशहर

पत्रांक : सी०एम०ओ०/एन०एच०एम०-स्वा०/2019-20/2730

दिनांक : 16.03.2020

Ms. Shwetanjali Lakra,
T18B, Allahipur, Railway Colony
Varanasi Uttaranchal UP, Pin - 221001

महाप्रबन्धक, एच०आर०, राष्ट्रीय स्वास्थ्य मिशन, उ०प्र० लखनऊ के पत्र संख्या - 18B/SPMU/DAP-HR/Appnt/2019-20/9707(2922) दिनांक 24.02.2020 के अनुपालन में आपको निर्देशित किया जाता है कि आप P.L. Sharma DH Meerut में योगदान कर, प्रशिक्षण प्राप्त करना सुनिश्चित करें तथा अपनी उपस्थिति प्रत्येक माह P.L. Sharma DH Meerut के कार्यालय में प्राप्त करना सुनिश्चित करें, जिससे आपका मानदेय (Stipend) समय से आहरित किया जा सके। प्रशिक्षण उपरान्त प्रमाण-पत्र की छायाप्रति सहित अग्रोहस्ताक्षरी कार्यालय में योगदान करना सुनिश्चित करें।

साथ ही यह भी निर्देशित किया जाता है कि आपकी नियुक्ति के समय, अग्रोहस्ताक्षरी के साथ एक Surety Bond भरा गया है, जिसमें यह उल्लेख है कि यदि आप प्रशिक्षण के दौरान या तीन वर्ष की सेवा पूर्ण करने से पहले या बिना किसी सूचना के कार्य करना बंद कर देते हैं तो आप पर खर्च हुए वास्तविक व्यय या Surety Bond पर अंकित अधिकतम धनराशि, आपको जिला स्वास्थ्य समिति, बुलन्दशहर के बैंक खाते में जमा कराने के पश्चात ही, अनापत्ति प्रमाण-पत्र दिया जाएगा अर्थात् कि दश में किसी भी केवैनिक कार्यवाही के लिए आप स्वयं उत्तरदायी होंगे।

मुख्य चिकित्सा अधिकारी
बुलन्दशहर

प्रतिलिपि निम्नलिखित को सूचनाार्थ एवं आवश्यक कार्यवाही हेतु प्रेषित :-

1. महाप्रबन्धक, एच०आर०, राष्ट्रीय स्वास्थ्य मिशन, उ०प्र० लखनऊ।
2. अपर निदेशक, चिकित्सा स्वास्थ्य एवं परिवार कल्याण, मेरठ मण्डल मेरठ।
3. अपर मुख्य चिकित्सा अधिकारी (आर०सी०एच०), कार्यालय अग्रोहस्ताक्षरी।
4. मुख्य चिकित्सा अधिकारी/अधीक्षिका P.L. Sharma DH Meerut को इस आशय के साथ कि उपरोक्त Candidate को प्रशिक्षण प्रदान कराने हेतु।

मुख्य चिकित्सा अधिकारी
बुलन्दशहर

कार्यालय मुख्य चिकित्सा अधिकारी, बहराइच।

संख्या-सी०एच०ओ०/तेनाती/2020 29356

दिनांक- 24 मार्च 2020

श्रीमती/कु० शिल्पा देवी

पत्नी/पुत्री श्री अनिल कुमार

पता-प्लॉट नं०-29 अजीजनगर कालोनी मझियाव जनपद लखनऊ।

मिशन निदेशक एन०एच०एम० उ०प्र०लखनऊ के पत्र संख्या-18
डी/एस०पी०एम०यू०/एच०आर०/नियुक्ति/2019-20/10322 दिनांक-16.03.2020 एवं मुख्य
चिकित्सा अधीक्षक जिला चिकित्सालय बहराइच के पत्र संख्या-
स्व०रा०चि०महा०ब०/ट्रिजप्रशि०/2019-20/7136 दिनांक-18 मार्च 2020 के क्रम में आपको 06
माह के ट्रिज प्रशिक्षण प्राप्त करने के उपरान्त आपकी प्रोविजनल/स्थाई तेनाती अनुबंध में दर्शाये
गये शर्तों के अधीन उपकेंद्र/हेल्थ वेलनेस सेन्टर नेवादा अधीन सामु०/प्र०स्वा०केन्द्र तेजवापुर
जनपद बहराइच पर की जाती है।

अतः आप अपने योगदान की सूचना अधीक्षक/प्रभारी चिकित्सा अधिकारी
सामु०/प्र०स्वा०केन्द्र तेजवापुर जनपद बहराइच के समक्ष प्रस्तुत कर निर्धारित चिकित्सा इकाई पर
कार्य करना सुनिश्चित करें। प्रोविजनल तेनाती अवधि में आपको रु०-20000.00(रु०-बीस हजार)
मात्र प्रतिमाह मानदेय(स्टाईपेंड) प्रदान किया जायेगा। आपके परीक्षा परिणाम घोषित होने के
उपरान्त सविदा तेनाती बाद में की जायेगी। परीक्षा में अनुत्तीर्ण होने पर आपकी तेनाती निरस्त कर
दी जायेगी।

मुख्य चिकित्सा अधिकारी
बहराइच।

संख्या-सी०एच०ओ०/तेनाती/2020

तददिनांक।

प्रतिनिधि-निम्नलिखित को सूचनाई एवं आवश्यक कार्यवाही हेतु प्रेषित।

- 01 मिशन निदेशक, राष्ट्रीय स्वास्थ्य मिशन उ०प्र०लखनऊ।
- 02 जिलाधिकारी/अध्यक्ष, जिला स्वास्थ्य समिति, बहराइच।
- 03 स्टेट नर्सिंग नोडल अधिकारी एस०पी०एम०यू० राष्ट्रीय स्वास्थ्य मिशन उ०प्र०लखनऊ।
- 04 महाप्रबन्धक मानव संसाधन एस०पी०एम०यू० एन०एच०एम० उ०प्र०लखनऊ।
- 05 मुख्य चिकित्सा अधीक्षक जिला चिकित्सालय, बहराइच।
- 06 जिला कार्यक्रम प्रबन्धक, एन०एच०एम० बहराइच।
- 07 अधीक्षक/प्रभारी चिकित्सा अधिकारी सामु०/प्र०स्वा०केन्द्र तेजवापुर जनपद बहराइच।

मुख्य चिकित्सा अधिकारी
बहराइच।

Principal
College of Nursing
56 Matiyah Chinha
Dewa Road Lucknow

**State Programme Management Unit,
National Health Mission, UP**

Ref.No.: 188/SPMU/DAP-HR/Appnt/2019-20/9707(311)

Date: 24-02-2020

TRAINING CUM OFFER LETTER

Ms. Prachi Misra

State Ayurvedic Hospital Nagar Campus Near Vikas Bhawan Thana Dehat Kotwali Distt Bahraich
271801 Up, 271801

Email: swati.jam19@gmail.com

Mobile No.: 9473815110

1. The National Health Mission, U.P., is pleased to inform you that you have been selected for a 6 month Certificate in Community Health for Nurses to be conducted by the State for January-2020 batch (re-scheduled from April 2020 to September 2020), based on the written test held on 16.06.2019. We are also pleased to offer you a full sponsorship for undertaking the course, subject to the terms and conditions.
2. You have to undergo six month training at **District Male Hospital-Bahraich**.
3. During the training period, your fixed honoraria would be **Rs.20,000/-(Rupees Twenty Thousand)** per month only. After successful completion of training (pass in term end theory and practical examination), you will be posted as the contractual position of Community Health Officer (CHO) at Health & Wellness Center at District **Bahraich**. As per the approval of Govt. of India, you may get an additional Rs. 15,000/-(Fifteen Thousand Rupees) per month as a performance based incentive as per guidelines.
4. You are directed to report to Chief Medical Officer, District **Bahraich**, for completing document verification formalities and submission of Surety Bond. You have to sign a surety bond to serve at Sub Centers level Health & Wellness Center for at least three years after successful completion of 6 months of training. The said formalities need to be completed on or before 15.03.2020.
5. After completion of the above formalities, You are directed to report between 16 March to 25 March 2020 to Program In-charge (Chief Medical Superintendent/Superintendent in Chief/Principal, Nursing School/RHFWTCs) at **District Male Hospital-Bahraich** for joining the training. The Session will be commence from 01.04.2020
6. You have to manage accommodation on your own expenses.
7. You are required to submit the attested copy of the following documents/ testimonials at the time of joining at the concerned office of CMO of posting district and a copy of the same to be submitted at the respective Program study center. Please note that original documents would be required for verification at the time of joining.
 - a) Copy of High School mark sheet and Pass Certificate.
 - b) Copy of Intermediate mark sheet and Pass Certificate.
 - c) Copy of mark sheet of GNM/ B.Sc Nursing and Degree Certificate.
 - d) Certificate copy of State Nursing Council, UP
 - e) Copy of ID proof, Permanent /Mailing Address proof.
 - f) Two passport size photographs.
 - g) Medical Certificate of Health from Govt. Hospital covering the following aspects: -
 - i) General Fitness.
 - ii) Report of Chest X-Ray.
 - iii) Report of Eye Specialist on vision.

Ref.No.: 18B/SPMU/DAP-HR/Appnt/2019-20/9707(1039)

Date: 24-02-2020

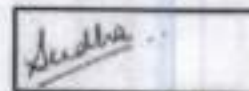
TRAINING CUM OFFER LETTER**Ms. Km Sarita Chaudhary**

Vill Kasaila Po Kasila Marwalya Distt Basti, 272002

Email: asaritachaudhary@gmail.com

Mobile No.: 7506342720

1. The National Health Mission, U.P., is pleased to inform you that you have been selected for a 6 month Certificate in Community Health for Nurses to be conducted by the State for January-2020 batch (re-scheduled from April 2020 to September 2020), based on the written test held on 16.06.2019. We are also pleased to offer you a full sponsorship for undertaking the course, subject to the terms and conditions.
2. You have to undergo six month training at **Govt. Medical College, Opec Hospital, Basti**.
3. During the training period, your fixed honoraria would be **Rs.20,000/- (Rupees Twenty Thousand)** per month only. After successful completion of training (pass in term end theory and practical examination), you will be posted as the contractual position of Community Health Officer (CHO) at Health & Wellness Center at District **Basti**. As per the approval of Govt. of India, you may get an additional Rs. 15,000/- (Fifteen Thousand Rupees) per month as a performance based incentive as per guidelines.
4. You are directed to report to Chief Medical Officer, District **Basti**, for completing document verification formalities and submission of Surety Bond. You have to sign a surety bond to serve at Sub Centers level Health & Wellness Center for at least three years after successful completion of 6 months of training. The said formalities need to be completed on or before 15.03.2020.
5. After completion of the above formalities, You are directed to report between 16 March to 25 March 2020 to Program In-charge (Chief Medical Superintendent/Superintendent in Chief/Principal, Nursing School/RHFWTCs) at **Govt. Medical College, Opec Hospital, Basti** for joining the training. The Session will be commence from 01.04.2020
6. You have to manage accommodation on your own expenses.
7. You are required to submit the attested copy of the following documents/ testimonials at the time of joining at the concerned office of CMO of posting district and a copy of the same to be submitted at the respective Program study center. Please note that original documents would be required for verification at the time of joining.
 - a) Copy of High School mark sheet and Pass Certificate.
 - b) Copy of Intermediate mark sheet and Pass Certificate.
 - c) Copy of mark sheet of GNM/ B.Sc Nursing and Degree Certificate.
 - d) Certificate copy of State Nursing Council, UP
 - e) Copy of ID proof, Permanent /Mailing Address proof.
 - f) Two passport size photographs.
 - g) Medical Certificate of Health from Govt. Hospital covering the following aspects: -
 - i) General Fitness.
 - ii) Report of Chest X-Ray.
 - iii) Report of Eye Specialist on vision.

General Manager-HR
National Health Mission, UP

Copy to:

1. Chief Medical Officer/Convener, DHS, **Basti**.
2. Director-Nursing, DG-MH, UP, Lucknow.
3. CMS/SIC/Principal-Nursing School/RHFWTC/PIC, **Govt. Medical College, Opec Hospital, Basti**.
4. GM- Planning/Nursing, GM-Community Process, SPMU, NHM, UP.
5. State Nodal Officer, Nursing Cell, SPMU, NHM, UP.

**State Programme Management Unit,
National Health Mission, UP**

Ref.No.: 18B/SPMU/DAP-HR/Appnt/2019-20/10449(310)

Date: 18-03-2020

TRAINING CUM OFFER LETTER

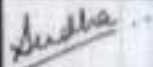
Ms. Diksha Sachan

VIII- Bamhanauti Post- Haramau Kanpur Dehat, 209111

Email: dikshasachan640@gmail.com

Mobile No.: 9621133320

1. The National Health Mission, U.P., is pleased to inform you that you have been selected for a 6 month Certificate in Community Health for Nurses to be conducted by the State for January-2020 batch (re-scheduled from April 2020 to September 2020), based on the written test held on 16.06.2019. We are also pleased to offer you a full sponsorship for undertaking the course, subject to the terms and conditions.
2. You have to undergo six month training at **MLB, Medical College, Jhansi**.
3. During the training period, your fixed honoraria would be **Rs.20,000/- (Rupees Twenty Thousand)** per month only. After successful completion of training (pass in term end theory and practical examination), you will be posted as the contractual position of Community Health Officer (CHO) at Health & Wellness Center at District **Jhansi**. As per the approval of Govt. of India, you may get an additional Rs. 15,000/- (Fifteen Thousand Rupees) per month as a performance based incentive as per guidelines.
4. You are directed to report to Chief Medical Officer, District **Jhansi**, for completing document verification formalities and submission of Surety Bond. You have to sign a surety bond to serve at Sub Centers level Health & Wellness Center for at least three years after successful completion of 6 months of training. The said formalities need to be completed on or before 26.03.2020.
5. After completion of the above formalities, You are directed to report latest by 31.03.2020 to Program In-charge (Chief Medical Superintendent/Superintendent in Chief/Principal, Nursing School/RHFWTCs) at **MLB, Medical College, Jhansi** for joining the training. The Session will be commence from 01.04.2020
6. You have to manage accommodation on your own expenses.
7. You are required to submit the attested copy of the following documents/ testimonials at the time of joining at the concerned office of CMO of posting district and a copy of the same to be submitted at the respective Program study center. Please note that original documents would be required for verification at the time of joining.
 - a) Copy of High School mark sheet and Pass Certificate.
 - b) Copy of Intermediate mark sheet and Pass Certificate.
 - c) Copy of mark sheet of GNM/ B.Sc Nursing and Degree Certificate.
 - d) Certificate copy of State Nursing Council, UP
 - e) Copy of ID proof, Permanent /Mailing Address proof.
 - f) Two passport size photographs.
 - g) Medical Certificate of Health from Govt. Hospital covering the following aspects: -
 - i) General Fitness.
 - ii) Report of Chest X-Ray.
 - iii) Report of Eye Specialist on vision.



General Manager-HR
National Health Mission, UP

**State Programme Management Unit,
National Health Mission, UP**

Ref.No.: 18B/SPMU/DAP-HR/Appnt/2019-20/9707(2919)

Date: 24-02-2020

TRAINING CUM OFFER LETTER

Ms. Shivani Lakra

Address Line 2, 226028

Email: lakrashivani99@gmail.com

Mobile No.: 8687365098

1. The National Health Mission, U.P., is pleased to inform you that you have been selected for a 6 month Certificate in Community Health for Nurses to be conducted by the State for January-2020 batch (re-scheduled from April 2020 to September 2020), based on the written test held on 16.06.2019. We are also pleased to offer you a full sponsorship for undertaking the course, subject to the terms and conditions.
2. You have to undergo six month training at **District Male Hospital-L. Kheri**.
3. During the training period, your fixed honoraria would be **Rs.20,000/- (Rupees Twenty Thousand)** per month only. After successful completion of training (pass in term end theory and practical examination), you will be posted as the contractual position of Community Health Officer (CHO) at Health & Wellness Center at District Kheri. As per the approval of Govt. of India, you may get an additional Rs. 15,000/- (Fifteen Thousand Rupees) per month as a performance based incentive as per guidelines.
4. You are directed to report to Chief Medical Officer, District Kheri, for completing document verification formalities and submission of Surety Bond. You have to sign a surety bond to serve at Sub Centers level Health & Wellness Center for at least three years after successful completion of 6 months of training. The said formalities need to be completed on or before 15.03.2020.
5. After completion of the above formalities, You are directed to report between 16 March to 25 March 2020 to Program in-charge (Chief Medical Superintendent/Superintendent in Chief/Principal, Nursing School/RHFWTCs) at **District Male Hospital-L. Kheri** for joining the training. The Session will be commence from 01.04.2020
6. You have to manage accommodation on your own expenses.
7. You are required to submit the attested copy of the following documents/ testimonials at the time of joining at the concerned office of CMO of posting district and a copy of the same to be submitted at the respective Program study center. Please note that original documents would be required for verification at the time of joining.
 - a) Copy of High School mark sheet and Pass Certificate.
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 - c) Copy of mark sheet of GNM/ B.Sc Nursing and Degree Certificate.
 - d) Certificate copy of State Nursing Council, UP
 - e) Copy of ID proof, Permanent /Mailing Address proof.
 - f) Two passport size photographs.
 - g) Medical Certificate of Health from Govt. Hospital covering the following aspects: -
 - i) General Fitness.
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 - iii) Report of Eye Specialist on vision.



General Manager-HR
National Health Mission, UP



चिकित्सा एवं स्वास्थ्य सेवाएं (उ.प्र.)
जिला महिला चिकित्सालय, बाराबंकी



परिचय पत्र

नाम : शालिनी शुक्ला
पिता का नाम : शिव कुमार शुक्ला
पद : नर्सिंग ऑफिसर
नियुक्ति तिथि : 05.02.2019
ब्लड ग्रुप : AB+
पता : 96, बी, दयाल स्टेट, मटियारी
चिनहट, लखनऊ
मोबाइल नम्बर : 8765580973



मोबाइल नम्बर

Shalini Shukla
नर्सिंग ऑफिसर

D. Shukla
Chief Medical Superintendent
District Women Hospital
Barabanki
जिला अजीबक

प्रभार प्रमाण पत्र

प्रमाणित किया जाता है, कि उ पचारिका 100 शैय्या मेटरनिटी चिंग जिला महि
चिकित्सालय बाराबंकी के पद का प्रभार महानिदेशक चिकित्सा एवं स्वास्थ्य सेवायें, उ०प्र०, लखन
के आदेश संख्या-19फ/01-एन/लो०से०आ०च/2018/309 दिनांक-01.02.2019 के अनुपालन
दिनांक-05.02.2019 के पूर्वाहन/अपग्रहन में हस्तान्तरित किया गया।

प्रभार मुक्त कर्मचारी

Shalini Shukla
प्रभार मोचक कर्मचारी
(शालिनी शुक्ला)

प्रतिहस्ताक्षरित

Shalini Shukla
मुख्य चिकित्सा अधीक्षिका
जिला महिला चिकित्सालय
बाराबंकी

कार्यालय, मुख्य चिकित्सा अधीक्षिका, जिला महिला चिकित्सालय, बाराबंकी।

पत्रांक- प्र० प्रमाण पत्र/उपचारिका/2018-19/490-496 दिनांक-18.02.2019

प्रतिलिपि निम्नलिखित को सूचनार्थ एवं आवश्यक कार्यवाही हेतु प्रेषित:-

1. महालेखाकार, उ०प्र० इलाहाबाद (प्रयागराज)
2. सचिव उ०प्र०, लोकसेवा आयोग, इलाहाबाद (प्रयागराज)
3. सचिव चिकित्सा स्वा० एवं प०क०, उ०प्र० शासन, चिकित्सा अनुभाग-8
महानिदेशक, चिकित्सा एवं स्वास्थ्य सेवायें, उ०प्र०, लखनऊ।
5. अपर निदेशक चिकित्सा स्वास्थ्य एवं परिवार कल्याण, अयोध्या मण्डल अयोध्या।
6. वरिष्ठ कौषाधिकारी, बाराबंकी।

संबंधित कर्मचारी।

Shalini Shukla

मुख्य चिकित्सा अधीक्षिका
जिला महिला चिकित्सालय
बाराबंकी।

कार्यालय- मुख्य चिकित्सा अधिकारी, संत कबीर नगर

पत्रांक- स्था0/स्टाफ नर्स/2018-19 / 12635

दिनांक- 06/2/19

आदेश

सुनीता सहानी

पुत्री श्री दयाराम सहानी

मकान नम्बर- 40ई, निकट- अशोका गैस गोदाम,

सिघडीया, कूडाघाट, जिला- गोरखपुर।

सूची क्रमांक 645

महानिदेशक, चिकित्सा एवं स्वास्थ्य सेवायें, उत्तर प्रदेश लखनऊ के आदेश संख्या 19फ/01-एन/लो0से0आ0च/2018 310717 दिनांक 01.02.2018 के द्वारा उत्तर प्रदेश लोक सेवा आयोग, इलाहाबाद (प्रयागराज) के पत्र संख्या 11(1)/01/ई-6/2016-17 दिनांक 05.11.2018 के द्वारा की गयी संस्तुति के आधार पर उत्तर प्रदेश अधीनस्थ नर्सिंग (अराजपत्रित) सेवा नियमावली 1999 यथा संशोधित नियमावली 2016 के नियमों व प्राविधानों के अन्तर्गत उक्त पत्र के साथ संलग्न सूची क्रम संख्या 01 से 1830 तक उल्लिखित अभ्यर्थियों की अस्थाई नियुक्ति उपचारिका के पद पर (समूह ख) वेतनमान 9300-34800 ग्रेड पे 4600 एवं पुनरीक्षित वेतन मैट्रिक्स रू0 44900-142400 (लेवल-7) में कार्यभार ग्रहण करने की तिथि से पत्र उल्लिखित शर्तों एवं प्रतिबन्धों के अधीन की गयी है।

उक्त के क्रम में आप द्वारा दिनांक 05.02.2019 को कार्यालय अधोहस्ताक्षरी में अपने योगदान की सूचना प्रस्तुत की गयी है। आपको नव नियुक्ति पर सामु0स्वा0केन्द्र- मेंहदावल, संत कबीर नगर के रिक्त स्टाफ नर्स के पद के सापेक्ष तैनात किया जाता है। आप तत्काल अधीक्षक, सामु0स्वा0केन्द्र-मेंहदावल, संत कबीर नगर के समक्ष अपनी योगदान आख्या प्रस्तुत कर कार्यभार ग्रहण प्रमाणक सम्बन्धित को यथाशीघ्र प्रेषित करना सुनिश्चित करें।

मुख्य चिकित्सा अधिकारी,

संत कबीर नगर

पंजीकृत

पत्रांक- स्था0/स्टाफ नर्स/2018-19

तद् दिनांक-

प्रतिलिपि- निम्नलिखित को सूचनार्थ एवं आवश्यक कार्यवाही हेतु प्रेषित।

1. सचिव, उत्तर प्रदेश लोक सेवा आयोग इलाहाबाद (प्रयागराज)
2. महानिदेशक, चिकित्सा एवं स्वास्थ्य सेवायें, उत्तर प्रदेश लखनऊ
3. अपर निदेशक, चिकित्सा स्वास्थ्य एवं परिवार कल्याण बस्ती मण्डल बस्ती।
4. अधीक्षक, सामु0स्वा0केन्द्र- मेंहदावल, संत कबीर नगर।
5. वरिष्ठ कोषाधिकारी, संत कबीर नगर।
6. लेखा लिपिक कार्यालय अधोहस्ताक्षरी अनुदान संख्या 32.36
7. गार्ड फाईल।

मुख्य चिकित्सा अधिकारी,

संत कबीर नगर

DISTRICT WOMEN HOSPITAL PRAYAGRAJ

Sl. No. : 41
Name : Satyawati
Father's Name : Mr. Hari Bhagat Singh
Post : CHO
D.O.B : 04/08/1991
D.O.J. : October 2019
Mob. : 8726724164
Blood Group : B+ve
Address : Vill Korram Post- Sathi Tahsil
Baberu, Distt. Banda



Satyawati
SIC
D.W.H. Prayagraj

कार्यालय, मुख्य चिकित्साधिकारी, जनपद-महाराजगंज।

पत्रांक: स्वा./नियु./सविदा/2019/

दिनांक 12/03/2019

रू0/श्रीमती दिग्मा पटेल

पुत्री श्री गिरीश चन्द्र पटेल

निवासी-मऊपाकड़ एन0पी0पी0 महाराजगंज वार्ड नं0-23

जनपद-महाराजगंज।

महाप्रबन्धक (मानव संसाधन), राज्य कार्यक्रम प्रबन्धन इकाई, राष्ट्रीय स्वास्थ्य मिशन, उ0प्र0, लखनऊ के पत्र संख्या-461/SPMU/NHM/Recruitment/2018-19/12316 दिनांक 05.03.2019 द्वारा निर्गत सूची के क्रम संख्या-4758, पर आपकी नियुक्ति मातृत्व स्वास्थ्य कार्यक्रम में नियत मानदेय रू0 12128/-प्रति माह पर ए0एन0एम0 (सविदा) के पद पर जनपद-महाराजगंज में वित्तीय वर्ष-2018-19 हेतु दिनांक 31.03.2019 तक के लिए जिला स्वास्थ्य समिति के अन्तर्गत किया गया है। यदि मिशन निदेशक, राष्ट्रीय स्वास्थ्य मिशन, उ.प्र. लखनऊ के द्वारा इस सम्बन्ध में कोई आदेश पारित किया जाता है तो तदनुसार अग्रिम कार्यवाही की जायेगी। उक्त आदेश के अनुपालन में तथा आपके योगदान सूचना दिनांक 11.03.2019 के क्रम में आपकी तैनाती ए0एन0एम0 (सविदा) के पद पर सामु0/प्रा0स्वा0 केन्द्र-महाराजगंज, जनपद-महाराजगंज के अन्तर्गत उपकेन्द्र-सलामतगढ़, जनपद-महाराजगंज में किया जाता है। आप अपने योगदान की सूचना अधीक्षक/प्रभारी चिकित्साधिकारी, सामु0/प्रा0स्वा0 केन्द्र-महाराजगंज, जनपद-महाराजगंज के समक्ष प्रस्तुत कर उनके निर्देशानुसार अपने तैनाती स्थान पर नियमित निवास करते हुए अपने पद के दायित्वों का निर्वहन करना सुनिश्चित करें।

भविष्य में भारत सरकार/राज्य सरकार से प्राप्त होने वाले दिशा-निर्देश इस आदेश के भाग माने जायेंगे। यह तैनाती भविष्य में किसी भी रिक्त पद पर विनियमितकरण, स्थायीकरण, नियमित वेतनमान में नियुक्ति हेतु कार्यवाही करने का अधिकार नहीं होगा। भारत सरकार एवं राज्य सरकार द्वारा प्राप्त दिशा-निर्देशानुसार कार्य सम्पादित करना होगा। मिशन निदेशालय द्वारा निर्गत नियुक्ति आदेश में उल्लिखित समस्त शर्तें आपकी तैनाती हेतु यथावत लागू मानी जायेंगी। अनुबन्ध हेतु रू0 100/- के गैर ज्युडिशियल स्टैम्प पेपर प्रस्तुत कर अनुबन्ध करना सुनिश्चित करें।

26-3-2019 Jinningdale

मुख्य चिकित्साधिकारी
महाराजगंज।

पत्रांक: स्वा./नियु./सविदा/2019/23419-28

तद्दिनांकित।

प्रतिलिपि निम्नलिखित को सूचनार्थ एवं आवश्यक कार्यवाही हेतु प्रेषित।

1. मिशन निदेशक, राष्ट्रीय स्वास्थ्य मिशन, 19ए, विधानसभा मार्ग, उ.प्र. लखनऊ।
2. महाप्रबन्धक, मानव संसाधन, मातृत्व स्वास्थ्य कार्यक्रम, राष्ट्रीय स्वास्थ्य मिशन, उ.प्र. लखनऊ।
3. अपर निदेशक, चिकित्सा स्वास्थ्य एवं परिवार कल्याण, गोरखपुर मण्डल, गोरखपुर।
4. जिलाधिकारी, जनपद-महाराजगंज।
5. अपर मुख्य चिकित्साधिकारी, आर.सी.एच., जनपद-महाराजगंज।
6. अधीक्षक/प्रभारी चिकित्साधिकारी, सामु0/प्रा0स्वा0 केन्द्र-महाराजगंज, जनपद-महाराजगंज।
7. जिला एवं सहायक चिकित्साधिकारी, कार्यालय, मुख्य चिकित्साधिकारी, जनपद-महाराजगंज।
8. जिला कार्यक्रम प्रबन्धक, एन0एच0एम0, जनपद-महाराजगंज।

6-

Signature
26/3/19

12/3/19
मुख्य चिकित्साधिकारी
महाराजगंज।

**State Programme Management Unit,
National Health Mission, UP**

Ref.No.: 179/SPMUHR/APPNT/2018-19/12275 (7373)

Date: March 2, 2019

OFFER LETTER

Yogita Singh
Bareilly Gadia Barabanki, PIN- 225003
Email: yogitas1245@gmail.com
Mobile No.: 7388041946

1. The National Health Mission, U.P. is pleased to inform you that you are selected for the post of **Staff Nurse (SN-MHCP)** on contract under **Maternal Health (SN-MHCP)** Programme, NHM, UP at **Amethi (District/Division), U.P.**
 2. Your fixed honoraria would be **Rs. 20,000/-** per month only.
 3. You are directed to report to concerned office of **Chief Medical Officer, Amethi District** on or before **April 6, 2019** for joining.
 4. The contractual appointment will be effective from the date of your joining till **31.03.2019**. Your position will be continued subject to the approval from Government of India.
 5. If you do not join by **April 6, 2019**, it will be presumed that you are not interested, and this offer letter will stand automatically cancelled.
 6. After joining, your appointment will be governed by the following general terms and conditions of services:-
 - a) That the District Health Society (DHS) will be the competent authority for appointment. You will be governed under DHS relating to work, conduct and discipline.
 - b) After successful completion of the aforesaid period, the contract may be renewed subject to annual performance review and as per discretion of the District Health Society.
 - c) The District Health Society will have the right to terminate your services by giving one month notice or an amount equivalent to one month salary in lieu of notice.
 - d) You will have the option of leaving the service of the Society by giving one month notice or an amount equivalent to one month salary in lieu of notice to the society.
 - e) That in case of any act of misconduct committed by the employee the District Health Society (DHS) will have the sole right to terminate the services.
 7. You are required to submit the certified copy of the following documents/testimonials at the time of joining to Chief Medical Officer concerned.
 - a) Certified copy of High School certificate.
 - b) Certified copy of the testimonial relating to educational qualification.
 - c) Certified copy of ID proof.
 - d) Certified copy of Experience certificate and No Objection Certificate/Relieving Letter from last Employer.
 - e) Permanent/Mailing Address proof.
 - f) Certificate from two persons about your work, conduct and character who are at responsible position in govt. department or renowned organization indicating their full address, phone/fax numbers and email address. The person should have known you for at least two years and should not be related to you.
 - g) Medical Certificate of Health from a govt. hospital covering following aspects:-
 - i) General Fitness. ii) Report of Chest X-Ray. iii) Report of Eye Specialist on vision. iv) Two passport size photographs.
 8. On successful completion of your joining formalities, Appointment letter and Service Agreement
-

State Programme Management Unit,
National Health Mission, UP

Ref.No.: 179/SPMU/HR/APPNT/2018-19/12275 (8728)
Date: March 2, 2019

OFFER LETTER

Neha Yadav

A/B, 31 3Rd Floor, Sulabh Awas Yojna Sector 5, Gomti Nagar Extension, Behind Sab Building
Shaheed Path, Lucknow, Uttar Pradesh - 226010, PIN - 226010

Email: nehakid123@gmail.com

Mobile No.: 9554603992

1. The National Health Mission, U.P. is pleased to inform you that you are selected for the post of **ANM, Maternal Health (ANM-MH)** on contract under **Maternal Health Programme, NHM, UP at Sitapur (District/Division), U.P.**
2. Your fixed honoraria would be **Rs. 12128/-** per month only.
3. You are directed to report to concerned office of **Chief Medical Officer, Sitapur District** on or before **April 6, 2019** for joining.
4. The contractual appointment will be effective from the date of your joining till **31.03.2019**. Your position will be continued subject to the approval from Government of India.
5. If you do not join by **April 6, 2019**, it will be presumed that you are not interested, and this offer letter will stand automatically cancelled.
6. After joining, your appointment will be governed by the following general terms and conditions of services:-
 - a) That the District Health Society (DHS) will be the competent authority for appointment. You will be governed under DHS relating to work, conduct and discipline.
 - b) After successful completion of the aforesaid period, the contract may be renewed subject to annual performance review and as per discretion of the District Health Society.
 - c) The District Health Society will have the right to terminate your services by giving one month notice or an amount equivalent to one month salary in lieu of notice.
 - d) You will have the option of leaving the service of the Society by giving one month notice or an amount equivalent to one month salary in lieu of notice to the society.
 - e) That in case of any act of misconduct committed by the employee the District Health Society (DHS) will have the sole right to terminate the services.
7. You are required to submit the certified copy of the following documents/testimonials at the time of joining to Chief Medical Officer concerned.
 - a) Certified copy of High School certificate.
 - b) Certified copy of the testimonial relating to educational qualification.
 - c) Certified copy of ID proof.
 - d) Certified copy of Experience certificate and No Objection Certificate/Relieving Letter from last Employer.
 - e) Permanent/Mailing Address proof.
 - f) Certificate from two persons about your work, conduct and character who are at responsible position in govt. department or renowned organization indicating their full address, phone/fax numbers and email address. The person should have known you for at least two years and should not be related to you.
 - g) Medical Certificate of Health from a govt. hospital covering following aspects:-
 - i) General Fitness. ii) Report of Chest X-Ray. iii) Report of Eye Specialist on vision. h) Two passport size photographs.

8. On successful completion of your joining formalities, Appointment letter and Service Agreement will be issued by Chief Medical Officer concerned on behalf of District Health Society (DHS).

General Manager-HR
National Health Mission, UP

कार्यालय मुख्य चिकित्सा अधिकारी, बस्ती

संख्या-एनएचएच/सविदा/नियु/2018-19/241/3-

दिनांक- 5 मार्च 2019

✓ मु/बीमारी/बी अर्थात् बीकास
 पु/पु/पानी- बी हरिसकर बीकास
 जल- जल का गुणवत्ता
 पी-संलग्न
 जनपद- (जजमार् 0000)

महाप्रबन्धक(एचओआर), राष्ट्रीय स्वास्थ्य मिशन, उ०प्र० लखनऊ के पत्र संख्या-461/ एचओपी/ एचओपी/एनएचएच/बी/2018-19/12316 दिनांक-05.03.2019 द्वारा प्राप्त अर्थात् सूची एवं दिने गये निर्देशों के अनुपालन में तथा आपको निर्गत आकर लेटर संख्या- 179/ एचओपी/एचओपी/ एचओआर/ नियुक्ति/ 2018-19/ 12276 (1700) दिनांक-02 मार्च 2019 के क्रम में आप द्वारा प्रस्तुत योगदान सूचना दिनांक- 07.03.2019 के परिपत्र में सदस्य सचिव, जिला स्वास्थ्य समिति, बस्ती के साथ आपको भेजा हुये अनुसंध में निहित शर्तों एवं प्रतिबन्धों के अन्तर्गत आपकी नियुक्ति सविदा के आधार पर राष्ट्रीय स्वास्थ्य मिशन योजना के अन्तर्गत मातृत्व स्वास्थ्य कार्यक्रम में ए०एन०एच० (सविदा) के पद पर कार्य करने हेतु करते हुये आपकी तैनाती समु०/प्र०स्वा०केन्द्र-मरवटिया, बस्ती में जिला पद पर दिनांक-31.03.2019 तक के लिए की जाती है। उक्त पद पर कार्य करने हेतु आपको संपत्ति-12128-00 (रू०-बादा हजल एक बी अड्डाईस लाख) प्रति माह की दर से मानदेय देय होगा।

आ उक्त के क्रम में आपको निर्दिष्ट किया जाता है कि आप अपने योगदान/उपस्थिति की सूचना अतिरिक्त आवीसक/प्र०वि०आ०,सामु०/प्र०स्वा०केन्द्र-मरवटिया, बस्ती को देकर उनको द्वारा दिये गये आदेशों/निर्देशों के अनुसार कार्य सम्पादन सुनिश्चित करें। आपको मानदेय आदि का भुगतान तैनाती स्थल पर योगदान/उपस्थिति की तिथि से ही जिला स्वास्थ्य समिति के अनुसंधानोपलब्ध देय होगा।

अनुसंध में निहित शर्तों एवं प्रतिबन्धों के अतिरिक्त निम्नलिखित का भी अनुपालन किया जाना आवश्यक होगा।

1. आपको कार्य सतोषजनक न पाये जाने/योजना समाप्त होने/उत्सवधिकारियों द्वारा प्राप्त निर्देशों अथवा भारत सरकार/राज्य सरकार द्वारा वर्ष 2019-20 की पी०आर०पी० में पद स्वीकृत न होने की दशा में किसी भी समय सविदा समाप्त की जा सकती है।
2. आर०आर०पी० में दिये गये दिशा निर्देश के अनुसार एवं बजट उपलब्ध होने पर वास्तविक रूप में कार्य करने की तिथि अथवा आर०आर०पी० में देय तिथि जो वास्तविक रूप से देय होगा में निहित दिशा निर्देश के अनुसार आपका योगदान एवं मानदेय का भुगतान स्वीकृत/देय होगा।
3. आप द्वारा उपलब्ध कराये गये अभिलेखों आदि के सत्यापन आदि में कोई विमलता पायी जाती है तो आपको संशोधन करना करते हुये आपकी त्रुटि त्रुटि कार्रवाई की जायेगी।
4. यदि आप द्वारा तैनाती के स्थान पर 10 दिनों के अन्दर योगदान प्रस्तुत नहीं किया जाता है तो उक्त अवधि के उपरान्त योगदान स्वीकार नहीं होगा।

उप मुख्य चिकित्सा अधिकारी
 आर०सी०एच०, बस्ती

मुख्य चिकित्सा अधिकारी
 बस्ती

संख्या-एनएचएच/सविदा/नियु/2018-19/

तददिनांक

प्रतिनिधि- निम्नलिखित को सूचना एवं आवश्यक कार्यवाही हेतु प्रेषित।

1. मिशन निदेशक, राष्ट्रीय स्वास्थ्य मिशन, उ०प्र०लखनऊ।
2. महानिदेशक, परिवार कल्याण उ०प्र०लखनऊ।
3. उप मुख्य चिकित्सा अधिकारी आर०सी०एच०/परिवार कल्याण, बस्ती।
4. जिला कार्यक्रम प्रबन्धक, एन०एच०एच०, बस्ती।
5. अधीक्षक/प्रभारी चिकित्साधिकारी सामु०/प्र०स्वा०केन्द्र-मरवटिया, जनपद-बस्ती।
6. वरिष्ठ डिल/सेवा सहायक, एन०एच०एच०, कार्यालय अयोध्यासहरी।

मुख्य चिकित्सा अधिकारी
 बस्ती

State Programme Management Unit,
National Health Mission, UP

Ref.No.: 179/SPMU/HR/APPNT/2018-19/12275 (1134)
Date: March 2, 2019

OFFER LETTER

Madhulika Srivastava
Village Roopour Majra Kishundapur Ramsahi Barabanki Ram Sahai Uttar Pradesh 225206. Pin->
225206
Email: madhulikasarivastava082@gmail.com
Mobile No.: 7985320628

1. The National Health Mission, U.P. is pleased to inform you that you are selected for the post of **ANM, Maternal Health (ANM-MH)** on contract under **Maternal Health Programme, NHM, UP** at **Barabanki (District/Division), U.P.**
2. Your fixed honoraria would be **Rs. 12128/-** per month only.
3. You are directed to report to concerned office of Chief Medical Officer, **Barabanki District** on or before **April 6, 2019** for joining.
4. The contractual appointment will be effective from the date of your joining till **31.03.2019**. Your position will be continued subject to the approval from Government of India.
5. If you do not join by **April 6, 2019**, it will be presumed that you are not interested, and this offer letter will stand automatically canceled.
6. After joining, your appointment will be governed by the following general terms and conditions of services:-
 - a) That the District Health Society (DHS) will be the competent authority for appointment. You will be governed under DHS relating to work, conduct and discipline.
 - b) After successful completion of the aforesaid period, the contract may be renewed subject to annual performance review and as per discretion of the District Health Society.
 - c) The District Health Society will have the right to terminate your services by giving one month notice or an amount equivalent to one month salary in lieu of notice.
 - d) You will have the option of leaving the service of the Society by giving one month notice or an amount equivalent to one month salary in lieu of notice to the society.
 - e) That in case of any act of misconduct committed by the employee the District Health Society (DHS) will have the sole right to terminate the services.
7. You are required to submit the certified copy of the following documents/testimonials at the time of joining to Chief Medical Officer concerned.
 - a) Certified copy of High School certificate.
 - b) Certified copy of the testimonial relating to educational qualification.
 - c) Certified copy of ID proof.
 - d) Certified copy of Experience certificate and No Objection Certificate/Relieving Letter from last Employer.
 - e) Permanent/Mailing Address proof.
 - f) Certificate from two persons about your work, conduct and character who are at responsible position in govt. department or renowned organization indicating their full address, phone/fax numbers and email address. The person should have known you for at least two years and should not be related to you.
 - g) Medical Certificate of Health from a govt. hospital covering following aspects:-
 - i) General Fitness, ii) Report of Chest X-Ray, iii) Report of Eye Specialist on vision, h) Two passport size photographs.

**State Programme Management Unit,
National Health Mission, UP**

Ref.No.: 179/SPMU/HR/APPNT/2018-19/12275 (4863)

Date: March 2, 2019

OFFER LETTER

Km Madhu Gupta

VIII-Darauli Post- Shikarpur Maharajganj, PIN:- 273302

Email: sahilreema143@gmail.com

Mobile No.: 7880993787

1. The National Health Mission, U.P. is pleased to inform you that you are selected for the post of **ANM, Maternal Health (ANM-MH)** on contract under **Maternal Health Programme, NHM, UP at Maharajganj (District/Division), U.P.**
2. Your fixed honoraria would be **Rs. 12128/-** per month only.
3. You are directed to report to concerned office of Chief Medical Officer, **Maharajganj District** on or before **April 6, 2019** for joining.
4. The contractual appointment will be effective from the date of your joining till 31.03.2019. Your position will be continued subject to the approval from Government of India.
5. If you do not join by **April 6, 2019**, it will be presumed that you are not interested, and this offer letter will stand automatically cancelled.
6. After joining, your appointment will be governed by the following general terms and conditions of services: -
 - a) That the District Health Society (DHS) will be the competent authority for appointment. You will be governed under DHS relating to work, conduct and discipline.
 - b) After successful completion of the aforesaid period, the contract may be renewed subject to annual performance review and as per discretion of the District Health Society.
 - c) The District Health Society will have the right to terminate your services by giving one month notice or an amount equivalent to one month salary in lieu of notice.
 - d) You will have the option of leaving the service of the Society by giving one month notice or an amount equivalent to one month salary in lieu of notice to the society.
 - e) That in case of any act of misconduct committed by the employee the District Health Society (DHS) will have the sole right to terminate the services.
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 - c) Certified copy of ID proof.
 - d) Certified copy of Experience certificate and No Objection Certificate/Relieving Letter from last Employer.
 - e) Permanent/Mailing Address proof.
 - f) Certificate from two persons about your work, conduct and character who are at responsible position in govt. department or renowned organization indicating their full address, phone/fax numbers and email address. The person should have known you for at least two years and should not be related to you.
 - g) Medical Certificate of Health from a govt. hospital covering following aspects: -
 - i) General Fitness. ii) Report of Chest X-Ray. iii) Report of Eye Specialist on vision. h) Two passport size photographs.
8. On successful completion of your joining formalities, Appointment letter and Service Agreement

प्रेषक,

मुख्य चिकित्सा अधिकारी
गोण्डा।

सेवा में,

प्रधानाचार्य,
स्कूल आफ नर्सिंग बाय एजुकेशन सोसाइटी,
56 मटियारी विमहट देवा रोड लखनऊ।

संख्या - मु0चि0अ0/स्वा0का0म0/सं0नियु0सत्या0/2015/4740 दिनांक 16 फरवरी 2015
विषय - नवनियुक्ति स्वास्थ्य कार्यकर्ता(महिला) के प्रशिक्षणोपरान्त चरित्र प्रमाण पत्र के सत्यापन के सम्बन्ध में।

महोदय,

अवगत करना है कि महानिदेशक, परिवार कल्याण, परिवार कल्याण महानिदेशालय उ0प्र0 लखनऊ के पत्र संख्या-मा0शि0क0/परि0/नियु0/2014-15/ 519-75 दिनांक 02 फरवरी 2015 के द्वारा निम्नलिखित स्वास्थ्य कार्यकर्ता(महिला) को नियुक्ति हेतु अघोहस्ताक्षरी के अधीन तैनात किया गया है। जिसमें निम्नलिखित स्वास्थ्य कार्यकर्ता महिला के चरित्र प्रमाण पत्र का सत्यापन करने का निर्देश प्राप्त हुआ है। निम्न स्वास्थ्य कार्यकर्ता महिला द्वारा आपके इस्टीमेट से निर्गत चरित्र प्रमाण पत्र प्रस्तुत किया गया है। उक्त चरित्र प्रमाण पत्र की छाया प्रति इस पत्र के साथ संलग्न कर आपके पास इस आशय से प्रेषित है कि क्या उक्त प्रमाण पत्र आपके कार्यालय व हस्ताक्षर से जारी किया गया है, अथवा नहीं तथा निम्न कार्यकर्ता द्वारा आपके संस्थान से प्रशिक्षण प्राप्त किया गया है। अथवा नहीं है, की पुष्टि करने का कष्ट करें। कृपया इसे शीघ्र प्रामाणिकता प्रदान करें ताकि अग्रिम आवश्यक कार्यवाही की जा सके।

क्र0 स0	नाम / पिता का नाम	प्रशिक्षण वर्ष	चरित्र प्रमाण पत्र निर्गत की तिथि
1	ज्योति ठानी पुत्री बृजदिलास सिंह	2010-12	24.09.2013
2	अखिलेश कुमारी पुत्री राम बहादुर	2008-10	30.09.2013

संलग्नक:- उपरोक्तानुसार

सयदीय,
मुख्य चिकित्सा अधिकारी,
गोण्डा।

संख्या - मु0चि0अ0/स्वा0का0म0/सं0नियु0सत्या0/2015
प्रतिलिपि:- महानिदेशक, परिवार कल्याण, परिवार कल्याण, महानिदेशालय जगत नारायण रोड उ0प्र0
लखनऊ की सेवा में सादर सूचनाार्थ प्रेषित।

मुख्य चिकित्सा अधिकारी,
गोण्डा।