## **CALCUTTA SCHOOL OF TROPICAL MEDICINE**

## **GOVERNMENT OF WEST BENGAL**

108 Chittaranjan Avenue, Kolkata - 700073 Phone: 033 2212 3695/96/97 Fax: 033 2212 3698

Website: stmkolkata.org

Memo No: STM/DT/01/112/2023

Dated: 13.04.2023

## **RECRUITMENT NOTICE**

Applications are invited from eligible candidates for consideration of appointment of **One (01) DATA ANALYST** on temporary contractual basis at Centre of Excellence in HIV Care, School of Tropical Medicine, Kolkata under *West Bengal State AIDS Prevention & Control Society*. A panel will also be prepared which will remain valid for one year.

**Essential Qualification :** Graduate in any discipline wirth Diploma / Certificate in Computer Applications from a recognized Institute or University.

**Essential Experience :** Working experience in data management and working knowledge of health releated softwares.

**Desirable Qualification & Experience**: Graduate or Masters in Statistics / Mathematics will be preferred. Work experience in HIV/AIDS Programme in field settings.

Consolidated monthly Remunaration: Rs.21,000/-

**Age:** Up to **60 years** as on 01.01.2023.

**Last date of receiving application :** 10.05.2023 (up to 4 pm)

Applicants are requested to submit their application in the prescribed proforma by Speed Post or courier services along with self-attested photocopies of all required documents like age proof, academic qualifications (marksheets of Madhyamik or equivalent, Higher Secondary or equivalent, Graduation and Computer Applications), Work experience certificates/documents. They should also mention the full address, mobile number, e-mail ID).

The application should be addressed to the **Director**, **School of Tropical Medicine**, **108**, **Chittaranjan Avenue**, **Kolkata – 700073**. The filled up application may also be deposited at the "**Application Drop Box**" kept in the ground floor of the Office of School of Tropical Medicine, Kolkata.

The short-listed candidates will be called for an interview which will be communicated to them later on.

**Enclosed: Application Format** 

Director School of Tropical Medicine Kolkata

Director
School of tropical Merical
Kolkata - 700 07

## **Application Form**

Recruitment Notice No:					Date:		
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Name of Post applied for:  Name of Candidate:							
Father's / Husband's Name:							
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Declaration: I solemnly declare that the information furnished above are true to the							
best of my knowledge. I further undertake that if at any stage it is discovered that an							
attempt has been made by me, willfully to conceal or mispresent the facts, my candidature/appointment shall be summarily rejected without any notice.							
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Place: Signature of Candidate							
Date							