



GOVERNMENT OF ASSAM
OFFICE OF THE DIRECTOR OF HEALTH SERVICES (FW), ASSAM
SAWASTHYA BHAWAN, HENGRABARI, GUWAHATI-781036
Website: www.dhsfw.assam.gov.in, Email: dhsfw2020assam@gmail.com

No HSFW/Esstt./RE/Gr-III/119/Pt./2020/ 703

Dated Guwahati, the 25th May, 2023

ORDER

As per recommendation of the Recruitment Board of Health & Family Welfare Department and in pursuance of the Government approval vide Letter No. HLA.882/2021/377, Dated: 04/12/2021 and No. DME/119/2021/Pt.-III/254 Dated- 22/05/2023, the following candidates are hereby appointed to the post of Grade-III LDA(Computer Assistant)/Steno-Typist and vacancy as shown below against his/her name with effect from the date of joining in the scale of pay as shown below, subject to fulfilment of the following terms and conditions and subject to satisfactory Notarized Affidavit submitted by the candidate as per the Personnel (B) Department O.M. No. ABP.78/2021/01, dated 18/11/2021 in the format prescribed therein regarding character and antecedents and subject to satisfactory verification of documents and undertakings submitted by the candidate.

The candidates so appointed will not be governed by the existing Assam Services (Pension) Rules, 1969 and orders issued there under from time to time. They will be governed by a new set of Pension Rules under the "New Defined Contribution Pension Scheme".

Roll No.	Name	Address	Names of the Post	Scale of Pay	Name of Office with vacancy against which the candidate is appointed and posted
21305296	BHARGAB BAISHYA	C/o LATE PRATAP BAISHYA, 2 NO BAPUJI PATH, SUALKUCHI, KAMRUP - 781103	LDA(Computer Assistant)/Steno-Typist	Rs.14000/- to 60500/- G.P- Rs.6200/-	Under the establishment of Addl. Chief Medical & Health Officer (FW), Nagaon
21309018	DEVAJIT SARMA	C/o JOGENDRA DEV SARMA, BOROR TAL,, GUWAHATI-SUALKUCHI ROAD, VILL & PO.-BONGSHAR, PS.-SUALKUCHI, KAMRUP - 781103	LDA(Computer Assistant)/Steno-Typist	Rs.14000/- to 60500/- G.P- Rs.6200/-	Under the establishment of Addl. Chief Medical & Health Officer (FW), Lakhimpur
21611657	JAGADISH DAS	C/o SATYA DAS, VILL - BHOBOLA GAON, P.O. - CHARIDUAR, PS - CHARIDUAR, TEZPUR, SONITPUR - 784103	LDA(Computer Assistant)/Steno-Typist	Rs.14000/- to 60500/- G.P- Rs.6200/-	Under the establishment of Addl. Chief Medical & Health Officer (FW), Dibrugarh
21739611	SUBHASHISH DAS ROY	C/o SAMAR DAS ROY, HOUSE NO 7, BYE LANE 4, BARSHAPARA, GUWAHATI, KAMRUP (METRO) 781018	LDA(Computer Assistant)/Steno-Typist	Rs.14000/- to 60500/- G.P- Rs.6200/-	Under the establishment of Principal cum Chief Superintendent AMCH, Dibrugarh

The following are the Terms and Conditions of service for the appointee:

1. During his/her service period, he/she may be deputed or his/her services may be placed on attachment or on secondment basis to any other department/ sub-ordinate office/ public sector undertaking / society/ Mission under the State Govt. within and outside the State having the same pay scale and Grade pay for a period decided and specified by the State Govt.
While on such Deputation or on attachment or placed on Secondment basis he/she shall continue to be guided by the Assam Civil Services (Conduct) Rules, 1965 and Assam Services (Discipline & Appeal) Rules, 1964.
2. The services of any selected candidate found to have furnished false/ falsified information regarding educational qualification/ caste/ gender/ EWS status etc. in his/ her application and detected subsequently, will be terminated and legal action will also be taken as per law.
3. If a Candidate or any of his/her family members is availing benefits under the Orunodoi Scheme at the time of the appointment, he/she or the concerned family member shall voluntarily opt out of the Scheme, as per Orunodoi Guidelines for getting appointment to the post.
4. The appointee shall also have to furnish a signed undertaking/affidavit at the time of joining as- **"I,.....(Name), appointed as.....(Designation) in.....Department of Government of Assam do hereby solemnly affirm and declare that, I voluntarily and without duress agree to the terms and conditions mentioned in the appointment order. I also solemnly affirm and declare that I satisfy all the qualifying criteria of the post to which I am appointed to. I also declare that I do not have more than one wife living (applicable for male candidates) / have married a person who has wife living (applicable for female candidates). I also further declare that I do not have more than two living children on or after 01-01-2021 from a single or multiple partners. In case of any detection to the contrary in due course, I shall be summarily discharged from the Service."**
5. Further, the appointee shall also have to submit a Notarized Affidavit as per provisions of the Personnel (B) Department O.M. No. ABP.78/2021/01, dated 18/11/2021. Format of the affidavit is enclosed in Annexure-I.

The candidates are to report at the concerned Offices on 1st June, 2023 with all relevant documents.

Director of Health Services (FW), Assam
Swasthya Bhawan, Hengrabari, Guwahati-36
Dated Guwahati, the 25th May, 2023

Memo No HSFW/Esstt./RE/Gr-III/119/ Pt./2020/703-A

Copy forwarded for information & necessary action to:

1. The Principal Secretary to the Govt. of Assam, Health & Family Welfare Department, Dispur, Guwahati-06 for favour of your kind information.
2. The Accountant General, Assam, Maidamgaon, Beltola, Guwahati-29.
3. The Director of Accounts & Treasuries, Kar Bhawan, Dispur, Guwahati-6.
4. The Additional Chief Medical & Health Officer (FW), Nagaon / Lakhimpur / Dbrugarh. He/ She is requested to obtain undertaking and Affidavit from the incumbent as mentioned and conduct document verification of the appointee immediately during the joining. He/ She is also requested to intimate the joining status to the undersigned within 15 days from the date of joining without fail.
5. The Principal-Cum-Chief Superintendent, AMCH, Dibrugarh. He/ She is requested to obtain undertaking and Affidavit from the incumbent as mentioned and conduct document verification of the appointee immediately during the joining. He/ She is also requested to intimate the joining status to the undersigned within 15 days from the date of joining without fail.
6. The Treasury Officer of all concerned districts.
7. Person Concerned.
8. Office Copy

Director of Health Services (FW), Assam
Swasthya Bhawan, Hengrabari, Guwahati-36

ANNEXURE-I

AFFIDAVIT

I..... son/daughter/wife ofaged.....years, resident of
(Mention full postal address), do hereby declare the followings to facilitate my appointment to the below mentioned post, without Police Verification Report:-

1. That I am citizen of India by.....and a resident of the aforesaid locality.
2. That I am a selected candidate for the post of which was advertised vide no.....and the final selection list of which was published/intimated vide no..... Dated.....
3. That contact telephone number(s) is/are..... and my e-mail id (if any) is.....
4. That, I hereby declare that there is no pending criminal case against me.
5. That, I have not been convicted of any offence involving moral turpitude and have not been dismissed from service by the Union Government or by a State Government or any Local/ Autonomous Body.
6. That, I am not a member of or associated with any body or association declared unlawful.
7. That, there is nothing in my character and antecedents which renders me unsuitable for appointment to the above-mentioned post.
8. That, if anything is found contrary to the declarations made herein above in this affidavit, and if the Appointing Authority is satisfied that such finding renders me unsuitable for the service, may discharge/remove or dismiss me from the Service without assigning any reason or divulging the findings. In such an event, I will have no claim or grievance against the appointing authority/authorities and I shall be liable to be prosecuted under the Law.
9. That, the statements made in paragraphs 1 to 8 above are true and correct to the best of my knowledge and belief and no part of it is false and nothing material has been concealed there from.

And I sign this affidavit today on20.....at.....

Identified by me

Advocate,.....

DEPONENT

Solemnly affirmed and declared before me by the deponent who is identified by..... Advocate,.....on this.....day of, 20.....at.....

ANNEXURE-II

UNDERTAKING

I,....., appointed as
..... in the Health & Family Welfare Department,
Government of Assam, do hereby solemnly affirm and declare that, I voluntarily and without duress
agree to the terms and conditions mentioned in the appointment order. I also solemnly affirm and
declare that I satisfy all the qualifying criteria of the post to which I am appointed to. I also declare that
I do not have more than one wife living (applicable for male candidates) / have married a person who
has wife living (applicable for female candidates). I also further declare that I do not have more than
two living children on or after 01-01-2021 from a single or multiple partners. In case of any detection to
the contrary in due course, I shall be summarily discharged from the Service.

Date.....

Signature of the Candidate