OFFICE OF THE

BALURGHAT MUNICIPALITY



SOVA MAJUMDER SARANI BALURGHAT: DAKSHIN DINAJPUR

e-mail - <u>bmpality@gmail.com</u> website: www.balurghatmunicipality.org

Memo No. 344 / G-8

Date | 9,1 2-2025

Notification for engagement of Health Officer and Part time Medical Officer (PTMO) under, Balurghat Municipality, West Bengal.

Balurghat Municipality invites application from suitable candidates for the following posts:

Health Officer (HO): - No. of Post 1(One)

Part Time Medical Officer (PTMO): - No. of Post 2(Two)

Eligibility Criteria

- The applicant must have medical qualification included in 1st or 2nd schedule or Part-2 of the 3rd Schedule of Indian Medical Council Act-1956 and registration as Medical Practitioner of West Bengal.
- 2) Upper limit of age for the posts in 62 Years as on 1st January 2025.

Terms & Conditions

- 1) The applicant must be permanent resident of West Bengal.
- 2) Remuneration of Health Officer will be Rs.62000/- per month.
- Remuneration of Part Time Medical Officer will be Rs.900/- per day upto maximum of Rs.24000/-Per Month.
- 4) The Health Officer will be engaged on contract basis for 1(One) year only. This may be extended for further periods if the appropriate authority approves.
- 5) The PTMO will have to work at least three days in a week. He / She will be engaged on contract basis for 1(one) year only. This may be extended for further periods if the appropriate authority gives approval.
- 6) The candidates will have to apply in the prescribed application format attached with this notification.
- 7) The Candidates should enclose: i) A self attested photocopy of age proof. ii) Educational qualifications iii) Experience certificate from the concerned Hospitals / Nursing Homes iv) Xerox copy ID proof or Voter ID Card or AADHAAR Card.
- 8) NOC from the organizations / Hospitals / Nursing Home where he / she is presently working.
- 9) Applications will have to be submitted through Post, Currier or by hand to the receive section of Balurghat Municipality but it must reach by last date of submission of applications.
- 10) The last date for submission of application is 29.12.2025.
- 11) No TA/DA will be paid to the candidate for appearing at the selection test / interview.
- 12) The original documents of age proof, educational qualifications, experience certificate etc. should be produced at the time of the Interview.
- 13) The appointment will be made only after getting approval from the appropriate authority.
- 14) The applicant can apply for one post or for both post.
- 15) The applicant should have the ability to read, write, and speak in Bengali (not required for those candidates whose mother tongue is nepali).
- 16) Decision of the competent authority will be final in the matter of selection. The Authority reserves the right to cancel / reject the application of any candidates without assigning any reason.

Chairman, Balurghat Municipality

Application for the Post of Part Time Medical Officer under Balurghat Municipality

Application Form

Application No. (For Office Use Only)

To The Chairman, Balurghat Municipality

Sir,

I am submitting herewith my candidature for the post of Part Time Medical Officer. My details particulars are given below:-

(Relevant attested documents for educational qualifications and work Experiences need to be attached with this application form and original documents will be checked at appropriate time to be notified in due course)

PASTE (Do not Pin or Staple here). Paste recent pass port size colour photograph of size 3.5 cm X 3.5 cm. The Colour photograph should not be more than 3 months old.

Please put your signature across the photograph.

Application for	or the P	ost of Part	time	Medical	Officer	(PTMO)
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1. Name of the Candidate (In Capital Letter) :
FIRST NAME:
MIDDLE NAME:
SURNAME:
2. Father's / Husband's Name (In Capital Letter) :
3) DATE OF BIRTH (DD/MM/YYYY)
4) Age as on 01.01.2025 Years Months
5) Nationality:
6) Address:
7) POSTAL ADDRESS (In Capital Letter):
P.O:
Town / City:
Municipality: Ward No:
District:
State:
Pin Code:

10) M	obile Number:					
11) Res	idence:					
12) E- 1	nail id:					
13) Edu	cational Qualification:					
Sl. No.	Name of the Examination	Year of Passing		% of Mark	s Subjects	Board/ University
14) Deta	Others, if any ails of Relevant Work Exper	ience (Starting	with the	current or r	most recent one (Add more cells
and pag	ails of Relevant Work Exper	ience (Starting Post Held	with the	current or r	nost recent one (
and pag	ails of Relevant Work Exper ges if required) Organization / Office					
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I hereby declare that I have carefully read the conditions of eligibi acceptable to me and I fulfill these conditions. The details mentioned documents in original whenever required.	lity mentioned in the advertisement. These conditions are in the Application are true and I shall furnish the necessary
If any information/ details found to be incorrect / false at any stage concealed by me or detected even after the appointment, my engages	
Date:	
Place:	Full Signature of the Candidate

Declaration: