

OFFICE OF THE BOARD OF COUNCILLORS

KATWA MUNICIPALITY

P.O. KATWA, DIST. PURBA BARDHAMAN, PIN-713130

Detail Notification for recruitment of 1 (One) Health Officer (Contractual) within Katwa Municipality

A Walk-in-interview will be held for selection of a Health Officer on Contractual basis within Katwa Municipality under CBPHCS Scheme. Indian Citizen having medical qualification in the 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 with desirable qualification of 2 years practicing experience and having not more than 62 years of age as on 01.01.2022 are invite to attend the same on 17/05/2022 at 12.00 noon at Katwa Municipality. The minimum Qualification should be MBBS degree from a recognized university approved by Medical Council of India.

Applicants have to bring all testimonials in original and self-attested photocopies for proof of Educational Qualification, Technical Qualification, Proof of Age and resident on that day along with filled in application in plain paper as per prescribed format.

A recent coloured passport sized photograph is to be affixed over the application duly signed by the applicant across the photograph into earmarked box.

Application form not be sent to this end neither by hand/ post nor through e-mail and/ or any other way in any circumstances.

In terms of selection of Health officer, decision of the selection committee is final.

Selected candidate will be appointed on contractual basis with a consolidated monthly remuneration of Rs. 62,000.00 (Rupees Sixty Two Thousand only) per month for the period of 01(one) year from the date of joining and may be further extended subject to the satisfactory performance if deemed fit by the authority. The decision of Municipal authority in this regard is final.

Applicant should attend Katwa Municipality for Walk-in-interview on 17/05/2022 at 12.00 noon sharp.

The willing candidates are requested to report at this office sharp at 10 A.M. on 17/05/2022 for verification of Documents.

All kind of electronic gadgets are strictly not allowed during interview process.

The roles and responsibilities of the health officer should be strictly in compliance with W.B. Municipal Act 1993 & NUHM & CBPHCS norms thereof.

Chairman Katwa Municipality Katwa Municipality

Memo No. 107 (18)/KM/NUHM/2022, Dated Katwa, the 02.05.2022.

Copy forwarded for information and taking necessary action to:

- 1. The Director, SUDA with a request to publish this Notification in his office website.
- 2. The District Magistrate, Purba Bardhaman.
- 3. The CMOH & Secretary, DH & FWS, Purba Bardhaman.
- 4. The S.D.O. Katwa.
- 5. Vice Chairman, Katwa Municipality
- 6. Councillor, Katwa Municipality
- 7. The ACMOH, Katwa.
- 8. O.C. Municipal Affairs, Purba Bardhaman.
- 9. The Executive Officer, Katwa Municipality.
- 10. The Finance Officer, Katwa Municipality.
- 11. The Nodal Officer, NUHM, Katwa Municipality.
- 12. The PHM, NUHM, Katwa Municipality.
- 13. The H.O. in-charge, Katwa Municipality.
- 14. The Head Clerk, Katwa Municipality.
- 15. Notice Board, Katwa Municipality
- 16. Notice Board, UPHC 1 & 2.
- 17. I.T. Co-ordinator, Katwa Municipality (he is instructed to publish this notification in official website of Katwa Municipality).

18. Guard File.

Chairman

Katwa Municipality

Chairman

Katwa Municipality

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APPLICATION FORM

To
The Chairman
Katwa Municipality,
P.O. Katwa, District – Purba Bardhaman.

Colored Passport Photo with Signature of The Applicant to be affixed.

- 1. Name of the Post Applied for:
- 2. Applicant Name (In Block Letter):
- 3. S/D/W of:
- 4. Communication Address (With Pin Code):-
- 5. Gender:-
- 6. Date of Birth:-

Age (as on 01.01.2020)

- 7. Nationality:-
- 8. Caste SC/ST/OBC/General:-
- 9. Contract No & e-mail Id:-

10. Educational Qualification:-

| Sl. No. | Name of Exam | Board / University/ Council | Year of Passing | Total Marks | Class/ Division | Percentage of Marks |
|------------|--------------|-----------------------------------|--------------------|-------------|--------------------|------------------------|
| | | | | 53. | | |
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11. Technical Qualification:-

| imeri | Sl. No. | Name of Exam | Board / University/ Council | Year of Passing | Total Marks | Class/ Division | Percentage of Marks |
|-------|------------|--------------|-----------------------------------|--------------------|-------------|--------------------|------------------------|
| | | | | | | | |
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12. Working Experiences:-

| Sl. No. | Name of Organization | Position Held | Period of Working from to | Total Period of Working Experiences | Nature of Work |
|------------|-------------------------|------------------|---------------------------|---|----------------|
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13. Additional Qualification (if any):-

Declaration:-

I do hereby declare that the statements made in the application are true the best of my knowledge and belief and if any of the information given there in is not in conformity with this Advertisement my candidature shall liable to be can-celled.

Dated:

Signature of the Applicant

List of Documents are enclosed with application