

ASHOKENAGAR-KALYANGARH MUNICIPALITY
ASHOKENAGAR, DIST- NORTH 24-PARGANAS
Pin-743222

Date- 08.12.2021

Memo No. -AKM/ 5999 /2021

ENGAGEMENT NOTICE

Applications are invited from eligible candidates for engagement to the post of Health officer (On Contract) to be posted at Ashokenagar-Kalyangarh Municipality, Ashokenagar-Kalyangarh, North 24 Parganas.

No. of Post: 01 (One)

Period of Engagement: Initially for 1 (One) year.

Name of the Post: Health Officer

Qualification: Medical Qualifications included 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 qualifications of 2 years practicing experience.

Experience: Minimum 2 years practicing experience.

Contractual Remuneration: Rs. 62,000/- (Sixty Two Thousand) per month.

Age: Not more than 62 years as on 1st January, 2021.

Mail id for Application Submission: Email id- chairman_akm@yahoo.com

Last Date of Application: 24.12.2021.

Process of Selection: Interview to be conducted by the Selection Committee.

Probable Date of Interview: 30.12.2021.

General Information:

1. The engagement would be on purely contractual basis, initially for a period of 1 (One) year.
2. The Contractual Engagement does not confer any right for regularization or absorption in the post.
3. All original documents required to be presented at the time of Interview.
4. All communication through mail only i.e. Email id- chairman_akm@yahoo.com



Chairman
Selection Committee & Chairperson,
Ashokenagar-Kalyangarh
(UTPAL TALUKDAR,
Chairperson, Board of Administrator
Ashokenagar-Kalyangarh Municipality)

APPLICATION FOR ENGAGEMENT AS A CONTRACTUAL HEALTH OFFICER.

To,
The Chairperson,
Ashokenagar-Kalyangarh Municipality,
PIN-743222.

Affix self-
attested
photograph
signed
across

1. NAME :
2. FATHER'S/ HUSBAND'S NAME :
3. DATE OF BIRTH :
4. ADDRESS :
5. CONTACT NO. & EMAIL ID :
6. QUALIFICATION (as per IMC Act - 1956) :
7. REGISTRATION NO. OF WBMC :
8. SPECIALIST IN THE DISCIPLINE, IF ANY :
9. EXPERIENCE :

I do hereby declare that the information furnished above are true to the best of my knowledge and belief and that, if any stage, it is found that any of the above material information is false/ incorrect or is suppressed by me, my engagement is liable to rejected/ terminated.

Date:

(Full Signature of the Applicant)