



## Hooghly-Chinsurah Municipality

Mahendra Mitra Road, Pipulpati, PO & Dist. - Hooghly, West Bengal.

Tel.: (033) 2680-2899/2319, TeleFax. (033) 2680-6091

Website:-www.hcm.net.in & E-mail id:-hooghch@yahoo.com

### **-: EMPLOYMENT 2ND NOTICE :-**

Employment Notice No:-03/AMRUT/AKG/HCM


Date:-01.06.2016

Application in the “**Prescribed Formt**” is invited from the eligible candidates for purely contractual engagement of Specialists/Experts for the following posts under Atal Mission for Rejuvenation and Urban Transformation (AMRUT) along with the provision of subsequent renewal after every one year based on satisfactory performance appraisal under AMRUT under Hooghly Chinsurah Municipality.

Sl.No	Name of post	Qualification/Experience/Remuneration
1	Urban Planner	a) <b>No of posts-</b> One b) <b>Educational Qualification:-</b> Post Graduate degree in Planning/Social Science/Architecture/Civil Engineering having specialization / paper in urban development or planning or environment related subjects. c) <b>Experience:</b> Urban Planner/Management Expert, with strong background in project management with 3-5 yrs in a managerial position. <ul style="list-style-type: none"><li>• Experience in working with Urban Development Programmes</li><li>• Experience in Urban Reforms and Capacity Building programmes for ULBs.</li></ul>
2	Urban Infrastructure Specialist	a) <b>No.of psots</b> –One b) <b>Educational Qualification:</b> Graduate Engineer form recognized university. Have a broad range of experience in urban infrastructure and a strong background in Public Health Engineering specially water supply and sanitation. c) <b>Experience:</b> Have at least 3-5 yrs experience in designing and managing municipal infrascture projects, d) <b>Other Qualification:</b> Be very familiar with the laws and procedures of the Indian municipal environment.

Terms and Conditions are noted below-

- 1) The upper age limit of the specialists/ experts to be engaged in CMMU will be 40 years as on 01.04.2015.
- 2) Contractual monthly remuneration for each post will be Rs.50,000/- only
- 3) Candidates must furnish the self attested photocopies of all testimonials and certificates issued by the competent authority along with application.
- 4) Candidates should apply in the prescribed Application Form to be downloaded from the Website in A-4 Size paper.
- 5) Candidates should enclose self attested photocopy of the age proof certificate with the application.
- 6) Self attested recent passport size photo to be pasted on Application Form and name of the post for which applied must mentioned on the cover of the application and the top of the application form as "Application for the post of.....Under AMRUT".
- 7) Application should reach on the following address :-  
The Chairman,  
Hooghly Chinsurah Municipality  
Mahendra Mitra Road,Pipulpati,P.O & Dist-Hooghly,Pin-712103.
- 8) Candidates are requested to view the Website of Municipal Affairs Department ([www.wbdma.gov.in](http://www.wbdma.gov.in)) and of CMU ([www.changeekolkata.org](http://www.changeekolkata.org)) and [www.hcm.net.in](http://www.hcm.net.in) website of this municipality for further details.
- 9) Online application will not be entertained.
- 10) The willing candidates may send their application through Postal service/Courier service or the candidate may take the acknowledgement from the municipal office if they are willing to submit their application by hand. This office will not liable for any kind of postal/courier service delay.
- 11) **LAST DATE OF SUBMISSION OF APPLICATION IS 17.06.2016 upto 03.00 PM.**

  
Chairman, 01/06/2016  
City Level Selection Committee, AMRUT  
Hooghly Chinsurah Municipality  
**Chairman**  
Hooghly Chinsurah Municipality

APPLICATION FORM

APPLICATION No.  
(FOR OFFICE USE ONLY)

HCM/ /
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To  
The Chairman,  
Hooghly Chinsurah Municipality,  
Mahendra Mitra Road, Pipulpati,  
P.O & Dist-Hooghly

<b>Photo</b>
Passport size photograph to be pasted with full signature

Sir,  
Application for the post of.....at City Mission Manage-  
ment Unit, Hooghly Chinsurah Municipality under AMRUT.

1) Name (IN CAPITAL LETTER) :


2) Father's /Husband's Name ( In CAPITAL LETTER)


3) Gender:

Male		Female	
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4) Date of Birth:

D	D	M	M	Y	Y	Y	Y

5) Nationality :

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6) Address :-

6.1 Address for Correspondence (IN CAPITAL LETTER):

.....  
.....  
.....

Town/City:..... State.....Pin.....

6.2Permanent Address (In CAPITAL LETTER):.....

.....  
.....

Town/City:..... State.....Pin.....



12) Language Known:

Language	Reading	Writing	Speaking

13) Check List of documents (put Tick mark in the Box)

Sl.No	Documents	Y/N	No. of documents enclosed (photocopies)
1	Proof of age		
2	Proof of Academic qualification		
3	Proof of working experience		
4	Copies of recent passport size photographs		
5	No objection from present employer		

Declaration: - I hereby declare that I have carefully read the conditions of eligibility mentioned in the advertisement. These conditions are acceptable to me and I fulfill these conditions. The details mentioned in the Application are true and I shall furnish the necessary documents in original whenever required.

If any information / details found to be incorrect/ false at any stage of the selection process or if any fact found to have been concealed by me or detected even after the appointment, my engagement likely to be terminated.

Date:

Place:

.....  
Full Signature of the Candidate

Received a seal envelop from Sri/Smt.....  
of.....  
.....for the Post of.....in the  
CMMU,AMRUT,Hooghly Chinsurah Municipality, West Bengal (Content not verified)

Date :

Time:

Receiving Assistant

ADMIT CARD  
( for written examination only)  
TO BE FILLED IN BY THE CANDIDATE

Paste  
passport size  
photo (not to  
sign now)

Name of the Post:-

- 1) Name:-
- 2) Father's /Husband 's Name:-
- 3) Postal Address:-
- 4) Date of Birth :-

Note:- Bring all original certificates in support of Age, Educational Qualification, Working Experience & NOC from Concern Authority if present working any Organization.

Signature of the Candidate

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TO BE FILLED IN BY THE APPLICATION RECEIVING AUTHORITY

ROLL No.....

Name of the Examination/Interview Centre with complete address:

Date of Examination/Interview and time:

Reporting time at the centre:

Signature of the Executive Officer