



# MAHESHTALA MUNICIPALITY

## Office of the Board of Councillors

P.O. Maheshtala, Dist. South 24 Parganas, PIN – 700141

Phone : 2490-1651/3389, email : maheshtalamunicipality@gmail.com

Ref :: 259/I-A/MM/ESTT/763

Date :: 09/06/2022

### NOTIFICATION

Maheshtala Municipality is hereby invites online as well as offline applications from eligible candidates who's age not more than 62 years as on 1<sup>st</sup> January-2022 to fill up the post of Health Officer at Maheshtala Municipality, purely on contract basis for a period of 1 year from the date of joining with a fixed remuneration at Rs 40000/-p.m.(Rupees Forty Thousand) only and presently same has been revised as Rs-62000/- (Rupees Sixty-two-thousand)only, under notification No-582/UDMA-13014(99)/78/2020-BDG-MA SEC dated 26-02-21.

The opening date of registration of online & offline application is **14<sup>th</sup> June 2022** and Last date for submission online & offline application is **23<sup>rd</sup> June 2022 at 5.00p.m.**

The said post will be fill up by conducting a **walk-in-Interview on 25<sup>th</sup> June 2022-Saturday at 3.00p.m. at Municipality building Chairman's chamber.** Reporting 1p.m. to 2p.m.

While attending the interview candidates are requested to bring – Educational Qualification, Professional experience certificate, Voter card, Pan card, Aadhaar in original as well as self-attested copies of the same in support of age, Medical Registration number along with recent passport size photographs.

The applicants must have medical qualifications included in the 1<sup>st</sup> of 2<sup>nd</sup> schedule or part 2 of the 3<sup>rd</sup> schedule of Indian Medical Council Act 1956 and registration of Medical Practitioner of West Bengal with desirable qualification of 2 years practicing experience.

All applications in enclosed format must be submitted either in hand copy at Maheshtala Municipality office during office hours or by online at [maheshtalamunicipality@gmail.com](mailto:maheshtalamunicipality@gmail.com) positively within the period 14<sup>th</sup> June 2022 to 23<sup>rd</sup> June 2022.

After once submission of application against this notification any representation for modification of the information furnished in the application will not be entertain.

If at any stage of recruitment or there after it is found that any information furnished by the candidate in his/her application is false /incorrect or the candidate suppressed any relevant information or the candidate does not satisfy the eligibility criteria for the above mentioned post, Maheshtala Municipality have every right to reject or cancel his/her candidature forthwith without assigning any reason.

Chairman  
Maheshtala Municipality

Enclosures – Relevant documents :

- 1) Birth Certificate,
- 2) Educational Qualification Certificates,
- 3) Registration Certificates,
- 4) Experience Certificates,
- 5) Identification Proof – Aadhar Card / Voter Card / Passport / Driving License (Any One)

Application should be submitted by the prescribed format for details please visit following website.

[www.maheshtalamunicipality.org](http://www.maheshtalamunicipality.org)

Chairman  
Maheshtala Municipality

# APPLICATION FORM

Paste Color Passport size  
Photograph

NOTIFICATION NO :- 259/I-A/MM/Estt/763

APPLICATION NO :-

HEALTH OFFICER/MM/2022

(FOR OFFICE USE ONLY)

Name of the Post :- Health Officer (Maheshtala Municipality)

1. Name of the Candidate (in capital letter):-.....
2. Father's / Husband Name (in capital letter):-.....
3. Date of Birth (DD/MM/YYYY):- .....
4. Age as on 01.01.2022 :-.....Year.....Months..... Days.
5. Present Address (in Capital letter):-.....
6. Permanent Address (in Capital letter):- . . . . .
7. Nationality :-.....
8. Religion :- .....
9. Aadhaar No :- .....
10. Gender (M/F/Other):-
11. Academic Qualification :-

Academic Qualification	University/Board	Subject	Year of Passing	Full Marks	Marks Obtained	% of Marks	Division / Grade

12. Mobile No (Mandatory):- . . . . .

13. E-mail (if any) :- .....

**Declaration**

I do hereby declare that all the statements made by me in the application form are true and complete to the best of my knowledge and belief and nothing has concealed or suppressed that in case any of my statement is false / incorrect during any of recruitment and thereafter I shall be disqualified for the post applied for I shall be liable for any action.

Full signature of the Candidate.

**Enclosure :-**

- a ) Age Proof :- Admit Card or School Certificate / Birth Certificate / Madhyamik Pariksha.
- b) Certificate of M. B. B. S. and other qualifications.
- c) Experience certificate.
- d) Registration Certificate of Indian Medical Council (I. M. C. )
- e) Proof of residential address :- Voter Card / Aadhaar Card / Ration Card / Passport / Driving License.