():

: (03452) 255 164 / 255 767

Fax: (03452) 256 600

图:

: guskaramunicipality@yahoo.in

OFFICE OF THE GUSKARA MUNICIPALITY

P.O.: Guskara, Dist.: Purba Bardhaman, Pin - 713128, W.B.

ESTD.: 1988

Memo No. 1444/6.M/Health.



Dated, Guskara, the 29.07.2022

Walk in Interview

A walk in interview for the post of Health Officer (Contractual) will be conducted on 11.08.22 from 12:00 pm to 1:00 pm. Kindly bring all respective testimonials alongwith 2 sets of photocopies (Self Attested) and 2 passport size photographs. For details .Please visit our website www.guskaramunicipality.co.in & www.sudawb.org

SI. No.	Name of Post	Monthly consolidated Contractual Remuneration	No. Of post	Qualification Required for the post	Maximum age limit (As on 01.01.2022)
01	Health Officer (Contractual)	Rs.62,000.00	UR- 01	Medical qualification in the 1 st or 2 nd schedule or part-2 of the 3 rd schedule of Indian Medical Council Act 1956 and registration as Medical practitioner of West Bengal with desirable qualifications of 2 years practicing experience	Not more than 62 years

GENERAL INFORMATION :-

- 1. The contractual remuneration of the Health Officer will be fixed at Rs.62,000/- only per month.
- 2. The Health Officer shall be engaged on contract initially for a period of 01 (One) year.
- 3. The Candidate will have to come with duly filled prescribed format available in our website.
- 4. NOC requires for those applicants who are working in any organization/Government.

Guskara Municipality

Chairman Guskara Municipality

Contd.page-2

29.7.22

Estd-1988

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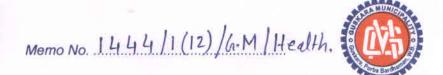
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GUSKARA MUNICIPALITY

P.O.: Guskara, Dist.: Purba Bardhaman, Pin - 713128, W.B.

ESTD.: 1988



Dated, Guskara, the 29.07.2022

Copy forwarded for information & necessary action to :-

- 1.The Director, SUDA, Kolkata
- 2. The District Magistrate, Purba Bardhaman.
- 3. The Sub Divisional Officer, Bardhaman Sadar (North), Purba Bardhaman.
- 4.The CMOH, Purba Bardhaman.
- 4. Vice-Chairman, Guskara Municipality.
- President, Health, Education and Urban poverty Elevation standing committee and Councilor, Guskara Municipality.
- **6.** President, Public Health & Sanitation standing committee and Councilor, Guskara Municipality.
- 7. The Executive Officer Guskara Municipality.
- 8. The Finance Officer Guskara Municipality.
- 9. The Head Clerk Guskara Municipality.
- 10. The S.I. Guskara Municipality.
- 11. The S.I. (CBPHCs), Guskara Municipality.
- 12. The IT Co-ordinator, Guskara Municipality-she is requested to upload the notice and application format in the Municipality website.

Estd-1988

Guskara Municipality

Chairman Guskara Municipality

APPLICATION FORMAT

(The application should be filled up in CAPITAL letters only)

Post applied for Health Officer (Contractual)

To,	AFFIX PASSPORT
The Chairman,	SIZE PHOTO
Guskara Municipality	
Sir,	
Application for the post of Health Officer (Contractual) in Guskara Municipality.	
1.NAME	
2. FATHERS/HUSBAND NAME	
3. GENDER: MALE/FEMALE	
4.CATEGORY (Alongwith sub-category, if any)	
5. DATE OF BIRTH (DD/MM/YY)	
6. NATIONALITY	
7.ADDRESS: ADDRESS OF CORRESPONDENCE	
PERMANENT ADDRESS	

Nobile	e No	Land	line No		
-mail	ID				
111011					
				No.	
	DEMIC QUALIFIC				
SI.	School/Board/	University/Institution	Degree/Diploma	Year of passing	Percentage Marks
No.				Pussing	obtained
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Declaration: I hereby declare that I have carefully read the conditions of eligibility mentioned in the advertisement. These condition are acceptable to me and I fulfill these conditions. The details mentioned in the application are true and I shall condition are acceptable to me and I fulfill these conditions. The details mentioned in the application are true and I shall condition are acceptable to me and I fulfill these conditions. The details mentioned in the application are true and I shall conditions are true and I shall be furnished. If any information/details is found to be to be furnished and appropriate legal action shall be taken against after the appointment, my engagement shall be liable to be terminated and appropriate legal action shall be taken against

Date.....

Full Signature of the Candidate