



Phone No.-033 71482293

e-mail ID: chakdahamunicipality@ymail.com

Website: www.chakdahamunicipality.in

OFFICE OF THE BOARD OF COUNCILLORS

Chakdaha Municipality

P.O: Chakdaha, Dist.: Nadia, Pin:- 741222

(West Bengal)

Memo No. 799/CM/2025-26

Dated: 25.07.2025

Notification for Engagement of Health Officer (H.O) under, Chakdaha Municipality, West Bengal.

Chakdaha Municipality invite application from suitable candidates for the following post:-

1. **Post:** Health Officer (H.O),

No. of post- 01(One),

The Health Officer (H.O) shall be engaged on contract initially for a period of 1(One) Year.

Qualification :

The applicant must have Medical Qualification include in 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.

Upper limit of age for the post is 62 Years as on 1st January 2025.

2. Application with all supportive documents must be reached by E-mail address chakdahamunicipality@ymail.com by 08.08.2025 (before 5.00 P.M) positively [Hard Copy of document(s) needless to submit, only application submitted through e-mail will be considered].

3. Application has to be made in the prescribed format (enclosed with this notification) only. The application form will have to be filled up on the basis of facts which they will have to substantiate subsequently showing the originals, on the date of interview, failing which there candidature will be cancelled.

4. Application reaching the above e-mail address after the stipulated date and time will not be considered for selection. "Application for the post of Health Officer under Chakdaha Municipality" should be superscribed on the subject of the e-mail e containing the field-in application form.

5. The application must be completed in all respects. Incomplete application will be summarily rejected.

6. The Candidate who do not have the required academic qualifications and competencies mentioned and who do not have capacities to discharge the responsibilities need not apply. Applications received from candidates not having the minimum academic qualifications and competencies will be summarily rejected.

7. Only short listed candidates will be called to attend the walk-in -interview and selection will be done on competitive basis.

8. Decision of the competent authority shall be final regarding selection of eligible candidate. Authority reserves the right to cancel all/any application without assigning any reason.

9. No TA/DA will be paid to the candidates appearing at the selection test/interview.


25.07.25

Chairman

Chakdaha Municipality

Chairman

Chakdaha Municipality

Chakdaha, Nadia

Chakdaha Municipality

P.O: Chakdaha, Dist.: Nadia, Pin:- 741222
(West Bengal)

The candidate
must affix here
recent coloured
photograph and
sign across

APPLICATION FORM

(Relevant attested documents for educational qualifications and Work Experiences need to be attached with this application form and original documents will be checked at appropriate time to be notified in due course)

1. Name of the candidate (in Capital Letters):

2. Posts applied for : Health Officer

3. Name of Father/Husband:

4. Date of Birth:

5. Age as on 01.01.2025:

6. Sex:

7. Nationality

8. Religion:

9. Caste (Gen/SC/ST/OBC):

10. Postal Address:

11. E-mail address(Mandatory):

12. Contact No. (Mandatory):

13. Education Qualification:

Name of Examination	Year of Passing	% of Marks	Subjects	Board/University
Others, if any				

14. Details of relevant work experience (starting with the current / most recent one)
(Add more cells and pages if required)

Sl No.	Organization /Office	Post held	From	To	Total period (years & months)
1					
Major responsibilities/tasks performed					
2					
Major responsibilities/tasks performed					
3					
Major responsibilities/tasks performed					
4					
Major responsibilities/tasks performed					
Total experience					

15. Whether the present organization will release immediately (in case contractual engagement is offered): Yes / No (indicate with \checkmark mark):

I do hereby certify that all the details stated above are true and that in case any information proves false my candidature will be liable to be cancelled.

Date:

Place:

Full Signature.....

my