

DUM DUM MUNICIPALITY

44, Dr. Sainen Das Sarani, P.S. Dum Dum, Kolkata – 700028.

Memo No: 1087/DDM/GEN/2025

Date: 29/11/2025

EMPLOYMENT NOTICE OF APPLICATION FOR THE POST OF HEALTH OFFICER UNDER DUM DUM MUNICIPALITY (PURELY CONTRACTUAL)

In terms of orders of the Dept. of Urban Development & Municipal Affairs Government of West Bengal issued by the special secretary, Vide No: 1556-UDMA-11012(99)/45/2021 dated 04.07.2025 applications are invited from the eligible candidates for the post of Health Officer under Dum Dum Municipality purely on Contract initially for period of 1 (One) year from the date of joining as per term and conditions are stated below:-

1. **Name of the post :** Health Officer
2. **No. of Vacancy:** 1 (One) Number.
3. **Age Limit:** Not more than 62 years as on 1st January 2025
4. **Qualification (Essential):** Medical qualifications included in the 1st or 2nd schedule of 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.
5. **Fixed Remuneration:** ₹62000/- (Sixty Two thousand only) per month.
6. **Terms & Condition :**
 - The Health Officer shall be engaged on contract initially for a period of 1 (One) year from the date of joining and shall be extended further on the basis of satisfactory performance and on obtaining approval for extension from the UD & MA Department.
7. **An application format duly filled in as given below:**
 - Self attested proof regarding permanent residential status (Passport/Voter ID card/ADHAAR card/Ration Card, etc.) to be submitted along with application.
 - Self attested copies of all relevant certificates.
 - NOC for those applications in case candidate is employed at present in any public/private institution/Establishment.
 - All applications must be submitted physically at the Municipal Office within working days and working hour at the designated drop box of municipality office. (Application format annexed).
 - Online Application will not be accepted.
 - **The last date of submission of application is 15th December 2025 within 5:00 pm. After that no application will be received or entertained.**
 - No TA/DA will be allowed to attend the interview.
8. **The Selection would be based on –**
 - Eligible candidates are to be called for interview in based on above criteria of eligibility for the said post by selection Board/Authority.



[Signature]

Chairman
Dum Dum Municipality

Chairman
Dum Dum Municipality
44, Dr. Sainen Das Sarani
Dum Dum, Kolkata-700028

DUM DUM MUNICIPALITY

44, Dr. Sainen Das Sarani, P.S. Dum Dum, Kolkata – 700028.

Memo No: 1087(C.O)/DDM/GEN/2025

Date: 29/11/2025

Copy forwarded for information and necessary action to:

1. The Director, State Urban Development Agency
2. The District Magistrate, North 24 Parganas
3. The Chief Medical Officer of Health, North 24 Parganas
4. The SDO, Barrackpore Sub-division
5. The ACMOH, Barrackpore Sub-division
6. The Executive Officer, Dum Dum Municipality
7. The Finance Officer, Dum Dum Municipality
8. The Head Clerk, Dum Dum Municipality
9. The IT Coordinator, Dum Dum Municipality Please upload this matter to the official website of Dum Dum Municipality
10. Office Notice Board, Dum Dum Municipality.



[Signature]

Chairman

Dum Dum Municipality

Chairman

Dum Dum Municipality
44, Dr. Sainen Das Sarani
Dum Dum, Kolkata-700028

APPLICATION FORMAT

To
The Chairman
Dum Dum Municipality
44, Dr. Sailen Das Sarani,
Dum Dum Cantonment
Kolkata: 700 028

Paste recent
Passport size
photograph duly
signed across

APPLICATION FOR THE POST OF HEALTH OFFICER (PURELY CONTRACTUAL)

Sir,

In response to your Advertisement Notice no.....Dated.....

For the post of Health Officer under Dum Dum Municipality purely on Contract initially for period of 1 (One) year from the date of joining, I prefer myself as a candidate. Detail of my BIO-DATA is given below:

1. Name (in BLOCK LETTER):
2. Father's Name:
3. Husband's Name (for married female):
4. Date of Birth (DD/MM/YYYY):
5. Age (as on 1.01.2025):
6. Sex:
7. Marital Status:
8. Nationality:
9. Address (as mention in Epic/ADHAAR):

10. Mobile Number:
11. E-Mail ID:
12. Qualification Details:

Sl No	Qualification	Year of Passing	Board/University	Total Marks	Marks Obtained	Percentage (%)
01	Madhyamik/Equivalent					
02	HS/Equivalent					
03	Medical Qualification: Medical Qualification included in the 1 st or 2 nd schedule of 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 experience					
04	Others (give details)					

13. Experience Details:

Sl No	Details of employer (Organization Name & Address)	Date of joining	Working Tenure (In Complete years)	Designation & Job Description

Declaration:

I do hereby declare that particulars furnished above all are correct.

Place:

Date:

Signature of the Applicant