



**Office of the Councilors of the
KHARAR MUNICIPALITY**
P.O. – KHARAR, DIST- PASCHIM MEDINIPORE

Memo No:- 133/KHM/25-26

Dated :- 10 / 07 / 2025


NOTIFICATION

Applications in prescribed format are invited from eligible persons for appointment to the post mentioned below.

Sl.No.	Name of the post	No.of vacancies	Category	Eligibility
1	Health Officer	1	Unreserved (Contractual)	Medical qualifications included in the First or Second Schedule or Part II of the Third Schedule of the Indian Medical Council Act, 1956 and registration as Medical Practitioner of West Bengal with desirable qualifications of two years practicing experience. ii. Age Limit - not more than 62 years as on 1st January 2025.

1. The remuneration of the Health Officer will be fixed at Rs.62,000/-(Sixty Two Thousand) only per month.
2. The Health Officer will be engaged on contract basis initially for a period of 1(one) year.
3. Candidates must furnish the self-attested photo copies of all testimonials and certificates issued by the competent authority along with application.
4. No TA/DA will be paid to the candidates for appearing at the selection test/interview.
5. Candidates must apply in the prescribed Application form to be downloaded from the Kharar Municipality Website www.khararmunicipality.org.in in A4 Size paper.
6. Candidate should enclose self-attested photocopy of the age proof certificate with the application.
7. The candidates have to submit their applications only through e-mail at ekhararmu@gmail.com (All documents have to be scanned along with the application form in PDF format and in a single PDF file.)
8. All communication with candidates will be made over Whatsapp and e-mail. No formal letter will be sent.
9. The last date for submission of applications is 31/07/2025.
10. The eligible candidates will be invited for an interview to be conducted by the Selection Committee.
11. Decision of the Selection Committee will be final regarding selection of candidates.
12. Candidates are requested to follow up the Website of Kharar Municipality for future guidance, schedule of selection Test/Interview etc.




Chairman
Kharar Municipality

**Chairman,
Kharar Municipality**



**Office of the Councilors of the
KHARAR MUNICIPALITY**
P.O. – KHARAR, DIST- PASCHIM MEDINIPURE

Memo No:- 133/KHM/25-26

Dated :- 10/07/2025

Copy forwarded for information to -

- 1) The Director of SUDA, Health wing, Ilgus Bhavan, Salt lake, Kol-106, with the request kindly to upload the notice to his official website.
- 2) The Special Secretary to the Govt. of West Bengal, UD & MA Department.
- 3) The District Magistrate, Paschim Medinipur, with the request to display it in his notice board and upload it to his official website.
- 4) The CMOH, Paschim Medinipur, with the request to display it in his notice board and upload it to his official website.
- 5) IT Co-ordinator, Kharar Municipality is directed to upload it in the website of Kharar Municipality.
- 6) Notice Board of the Office
- 7) Office Copy.



[Signature]

Chairman
Kharar Municipality

**Chairman,
Kharar Municipality**

APPLICATION FORMAT

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

Post applied for Health Officer (Contractual)

The Chairman,
Kharar Municipality
Kharar, Paschim Medinipur, Pin-721222

Sir,

Application for the post of Health Officer (Contractual) in Kharar Municipality.

1. NAME:-

2. FATHER'S/HUSBAND'S NAME:-

3. GENDER:- MALE ☐ / FEMALE ☐

4. CATEGORY (Along with sub-category, if any):-

5. DATE OF BIRTH (DD/MM/YYYY):- / /

6. NATIONALITY:-

7. ADDRESS:-

ADDRESS FOR CORRESPONDENCE:

.....

..... PIN -

PERMANENT ADDRESS:-

.....

..... PIN -

8. CONTACT DETAILS:-

MOBILE NO: LAND NO-

EMAIL ID:

9. ACADEMIC QUALIFICATION:-

SL.NO.	School/Board/University/Institution	Degree/Diploma	Year of passing	Percentage of marks obtained

10. ADDITIONAL QUALIFICATION (IF ANY):-

.....

.....

11. PRESENT OCCUPATION (IF ANY) :-

.....

NAME & ADDRESS OF EMPLOYER/ORGANIZATION:-

.....

11. EXPERIENCE (IF ANY):-

.....

.....

Declaration: I do hereby declare that I have carefully read the conditions of eligibility mentioned in the advertisement. Those conditions are acceptable to me. The details mentioned in the Application are true and I shall furnish the necessary documents in original whenever required. If any information/details is found to be incorrect/false at any stage of the selection process or if any fact is found to have been concealed by me or detected even after the appointment, my engagement shall be liable to be terminated and appropriate legal action shall be taken against me.

Date:

Place:-

Full signature of the candidate