

OFFICE OF THE BOARD OF ADMINISTRATORS  
**DANKUNI MUNICIPALITY**

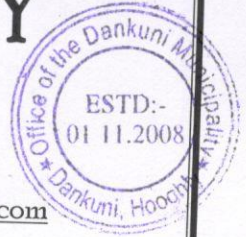
Estd: 01-11-2008

Uttar Subhas Pally, Manoharpur

P.O. & P.S.: Dankuni, Dist: Hooghly, Pin: 712311

Phone No. 033 2659 0694

Website: [www.dankunimunicipality.com](http://www.dankunimunicipality.com), E-mail id: [ulbdankuni@gmail.com](mailto:ulbdankuni@gmail.com)



Memo No. 1918/DKM/21-22

Date: 14/01/22

**EMPLOYMENT NOTIFICATION**

Applications are invited from eligible persons for appointment of Health Officer on Contractual Basis as detailed below, under Dankuni Municipality, Dankuni, Dist- Hooghly, West Bengal.

S.No.	Name of the Post	No. of Vacancy	Eligibility
01	HEALTH OFFICER	1(ONE)	<ul style="list-style-type: none"><li>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.</li><li>Age limit: Not More than 62 yrs as on 1<sup>st</sup> January 2022</li><li>Proficient with Computer applications and documentation skill along with fluency in English and Bengali or local languages of the State of West Bengal</li></ul>

**Terms and Conditions:-**

1. The Contractual remuneration of the Health Officer will be fixed at Rs. 62,000/- (Sixty Two Thousand) Only per Month.
2. The Health Officer shall be engaged on contract initially for a period of 1(one) year.
3. The Candidate will have to apply in the prescribed Application format which enclosed herewith.
4. Application format is to be downloaded from the website of Dankuni Municipality [www.dankunimunicipality.com](http://www.dankunimunicipality.com) and West Bengal Urban Dev. & Municipal Affairs Dept's (UD&MA) Website [www.wburbanservices.gov.in](http://www.wburbanservices.gov.in)
5. Candidate should enclose self attested photocopies of the age proof and relevant certifications.
6. NOC requires for those applicants who are working in any organization / Institution / Government establishment.
7. The candidates have to submit their applications through email at [ulbdankuni@gmail.com](mailto:ulbdankuni@gmail.com) and all self attested documents have to be scanned along with the application form in PDF format or hard copy by Post / Courier.
8. All communication with candidates will be made through e-mail / by post or courier only.
9. The last date for submission of application is - 31.01.22 within 05:00 PM or 17:00 Hrs.
10. Eligible candidates will be invited for an interview to be conducted by the Authority and selection committee.

  
14/01/22  
Vice Chairman, B.O.A

Dankuni Municipality  
(PIJUSH KANTI PAN)  
Vice-Chairperson

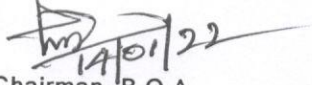
Board of Administrators



Date: 14/01/2022

*Copy forwarded for information & necessary action to :*

1. The Director, SUDA
2. The Addl. Secretary, UD & MA Department & Additional Director, SUDA
3. The Mission Director, NHM & Secretary Health & Family Welfare Department.
4. The District Magistrate, Hooghly District.
5. The ADM, Health, Hooghly
6. The State Nodal Officer, NUHM, Health & Family Welfare Department.
7. The CMOH, Hooghly District.
8. The SDO, Serampore, Hooghly
9. The ACMOH, Serampore, Hooghly
10. The BMOH, Chanditala-II, Hooghly
11. The Executive Officer, Dankuni Municipality.
12. The Finance Officer, Dankuni Municipality.
13. The IT Coordinator, Dankuni Municipality- for web posting
14. Notice Board.

  
Vice Chairman, B.O.A.  
Dankuni Municipality  
(PIJUSH KANTI PAN)  
Vice-Chairperson  
Board of Administrators  
Dankuni Municipality



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

**Post applied for Health Officer (Contractual)**

The Chairperson,  
Board of Administrator,  
Dankuni Municipality  
Dankuni, Hooghly



Paste one self-  
attested passport  
size photo

Sir,

I would like to apply for the post of Health Officer (Contractual) in Dankuni 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 (for correspondence) :  
.....  
.....
8. Contact Details: Mobile : ..... E-mail:.....
9. Academic Qualification: (from class X)

Sl No.	School/Board/University	Degree/Diploma	Year of passing	Percentage of marks obtained

10. Additional Qualification (If any):  
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.....  
.....  
.....  
.....

**11. Experience:**

SL No	Name of the Organisation	Designation	Date of Joining	Years of Experience

**Declaration:** I hereby declare that I have carefully read the conditions of eligibility mentioned in the advertisement. These conditions are acceptable to me and I shall fulfill these conditions. 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 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**