

OFFICE OF THE BOARD OF COUNCILLORS OF SANTIPUR MUNICIPALITY

(Estd. - 1853)

P.O. - Santipur, Dist. - Nadia, Pin. - 741404



..... Department

Memorandum No. 01/NUHM.

From :

Dated, Santipur the 10th July, 25

To :

Employment Notice No:

/Health

Dated:

Santipur Municipality has decided to engage 1 (One) Health Officer at consolidated remuneration of Rs. 62000/- (Sixty-two thousand) only on Contract Basis. Last date and time of submission of application is 25-07-2025 by 2:00 pm. For details, please visit the website: www.santipurmunicipality.org and www.sudawb.org.

Sd/-
Chairman
Santipur Municipality

APPLICATION FORMAT

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

Post applied for Health Officer (Contractual)

To,
The Chairman,
Santipur Municipality

AFFIX PASSPORT
SIZE PHOTO

Sir,

I apply for the post of ~~Full time~~ Health Officer (Contractual) in Santipur Municipality.

1.NAME.....

2.FATHER/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

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PERMANENT ADDRESS.....

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8. CONTACT DETAILS:

Mobile No.....Land line No.....

e-mail ID.....

9. ACADEMIC QUALIFICATION

| Sl. No. | School/Board/University | Degree/Diploma | Year of passing | Percentage of Marks obtained |
|---------|-------------------------|----------------|-----------------|------------------------------|
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10. ADDITIONAL QUALIFICATION (IF ANY):

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11. PRESENT OCCUPATION (IF ANY) :

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12. NAME & ADDRESS OF PRESENT

EMPLOYER/ORGANISATION:

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13. EXPERIENCE (IF ANY):

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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 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 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

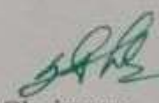
NECESSEARY INSTRUCTIONS

CONTRACTUAL RECRUITMENT OF HEALTH OFFICER UNDER SANTIPUR MUNICIPALITY

SUBJECT

INFORMATION

- | | |
|--|---|
| 1. Govt. Notification | Memo no. 1556-UDMA-11012(99)/45/2021 Dated 04/07/2025 |
| 2. Name of the Post | Health Officer |
| 3. No of Vacancy | 01 |
| 4. Reservation Category | UR |
| 5. Age Bar | Not More than 62 years as on 01/01/2025 |
| 6. Essential Educational Qualification | Must have Medical Qualification as per 1 st /2 nd Schedule or Part-2 of the 3 rd Schedule of the Indian Medical Council Act 1956 & Registration as Medical Practitioner of West Bengal |
| 7. Desirable | 2 Years Practicing Experience |
| 8. Monthly Consolidated Remuneration | Rs. 62,000/-(Sixty two thousand) |
| 9. Mode of Engagement | Contractual, Initially for one (1) year with subsequent renewal based on performance. |
| 10. Selection Procedure | a.) To publish the vacancy notice in a Bengali daily and English daily New Paper, and in web sites: santipurmunicipality.org/sudawb.org b.) Walk in- Interview will be held on a suitable date after 25/07/2025 c.) Applications as given format in website should reach to this office by 25/07/2025 with registered post. |
| 11. Other Documents | a.) Two copies of self attested passport size of photographs . b.) Two sets of necessary testimonials (self attested). c.) N.O.C. requires for those applicants who are working in any organizations. |


Chairman 11/07/25
Santipur Municipality