

## DIAMOND HARBOUR MUNICIPALITY

# Diamond Harbour, South 24-Parganas

Memo No: 1849/A-16/DHM/25

Date: 29.08.2025

## Walk-in-Interview

A Walk-in-Interview for the post of Health Officer (Contractual) will be conducted on 12.09.2025 (Friday) from 12:00 pm to 01:00 pm in the Meeting Hall of the Board of Councillors of Diamond Harbour Municipality. Kindly bring all relevant testimonials along with 2 (two) sets of self-attested Photocopies of the same and 2 (two) copies passport size photographs. For details, please visit our website <a href="https://www.diamondharbourmunicipality.org">www.diamondharbourmunicipality.org</a> & <a href="https://www.suda.org">www.suda.org</a>

SI. No:	Name of Post:	Monthly consolidated Contractual Remuneration:	No. of Post:	Qualification required for the post:	Maximum age limit (As on 01.01.2025)
01.	Health Officer (Contractual)	Rs: 62,000/-	UR-01	Medical qualification in the 1 <sup>st</sup> or 2 <sup>nd</sup> schedule or part-2 of the 3 <sup>rd</sup> schedule of Indian Medical Council Act 1956 and registration as Medical practitioner of West Bengal with desirable qualifications of 2 (two) practicing experience	Not more than 62 years

#### **GENERAL INFORMATION:**

- 1. The contractual remuneration of the Health Officer will be fixed at Rs: 62,000/- only per month.
- 2. The Health Officer shall be engaged on contract initially for a period of 01 (one) year.
- 3. The candidate will have to come with duly filled prescribed format available in our website.
- 4. NOC requires for those applicants who are working in any organization/Government.

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Chairman Diamond Harbour Municipality

Chairman
Diamond Harbour Municipality
South 24 Parganas



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#### Copy forwarded for information and necessary action to:

- 1. The Director, SUDA, Kolkata.
- 2. The District Magistrate, South 24-Parganas.
- 3. The Sub-Divisional Officer, Diamond Harbour Sub-Division.
- 4. The CMOH, Diamond Harbour Health District, South 24-Parganas.
- 5. The Vice-Chairman, Diamond Harbour Municipality.
- 6. The Councillor-in-Charge, Health, Diamond Harbour Municipality.
- 7. The Executive Officer, Diamond Harbour Municipality.
- 8. The Finance Officer, Diamond Harbour Municipality.
- 9. The IT Co-Ordinator, Diamond Harbour Municipality with a request to upload the notice and application format in the Municipality website.

10. Office Notice Board, Diamond Harbour Municipality.

Chairman

**Diamond Harbour Municipality** 

Chairman
Diamond Harbour Municipality
South 24 Parganas

#### **APPLICATION FORMAT**

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

Post applied for Health Officer (Contractual)

Diame	hairman ond Harbour Municipality 24-Parganas.			fix Passport ize photo			
Sir,							
	I am applying for the post of Health Office	r (Contractual) in D	iamond Ha	rbour Municipality.			
	ersonal Details are as under: NAME	*					
2.	FATHER/HUSBAND NAME	*					
3.	GENDER (MALE/FEMALE)	**					
4.	Designation of the Committee of the Comm	٠.					
5.	the state of the s						
6.	NATIONALITY	•					
175		, ·					
7.	7. ADDRESS: ADDRESS FOR CORRESPONDANCE						
	ADDRESS FOR CORRESPONDANCE						
	PERMANENT ADDRESS						
8. CONTACT DETAILS:							
	Mobile No: Landline No:e-mail ID						
9.	ACADEMIC QUALIFICATION:						
SI. No:	School/Board/University: Deg	ree/Diploma:	Year of Passing:	Percentage of marks obtained:			

SI. No:	School/Board/University:	Degree/Diploma:	Year of Passing:	Percentage of marks obtained:
		*		

10. ADDITIONAL QUALIFICATION (if any):	
11. PRESENT OCCUPATION (if any):	
12. NAME & ADDRESS OF PRESENT EMPLOYER/ORGAN	
13. EXPERIENCE (if any):	
<b>Declaration:</b> I hereby declare that I have carefully read the conditions are acceptable to me and mentioned in the application are true and I shall furnish whenever required. If any information/details is/are found to selection process or if any fact is found to have been concerappointment my engagement shall be liable to be terminated taken against me.	the necessary documents in original obe incorrect/false at any stage of the caled by me or detected even after the
Date	
Place	
F	full Signature of the Candidate