ffice of the Burdwan Municipality

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Memo No: - 955/6/xu-6

Date: - 27, 12, 21

Notice for Walk-in-Interview

Burdwan Municipality requires the following posts: -

Name of the post	Upper Age Limit	No. of Posts	Eligibility Criteria	Remuneration
(artaine)	66 years as on 01/01/2021	Total -6	MBBS from a MCI recognized institute with 1 year compulsory internship. Must be registered under West Bengal medical Council.	Rs. 24,000/- consolidated per month or Rs 500 on actual basis of no. of duty days but not exceeding Rs. 24,000.00, whichever is lower

1. The engagement is purely on contractual basis. Initial period of engagement is upto March 2022, which may be renewed depending upon need and performance of the candidate. 2. No TA DA will be allowed for the interview.

Interested candidates may join in a walk-in-interview on 5th January 2022 at the Conference Hall of the Burdwan Municipality with a Bio-Data, in prescribed format (enclosed herewith), and all testimonials in original along with one self attested copy of each. All the candidates should report this office within 10.30

> Vice-Chairperson Board of Administrators Burdwan Müh **Board** Pality Administrator

Memo No: - 955/9/24-6/1(2)

Copy forwarded for information to: -

1. The Sabhadhipati, BurdwanZillaParisad, Burdwan. 2. The District Magistrate, Burdwan.

3. Executive Officer / Finance Officer, Burdwan Municipality

4. Secretary, Burdwan Municipality

5. AE, Engineering Department, Burdwan Municipality

6. Office Notice Board/ Official Website, Burdwan Municipality.

7. Editor, ______, Burdwan with a request to publish the advertisement.

Vice-Chairperson Board of Administrators : Burdwan Municipality

Vice Chairperson Board of Administrator Burdwan Municipality

BIO DATA FOR THE POST OF PART TIME MEDICAL OFFICER (To be filled in by the candidate in BLOCK LETTER) Name of the candidate: 2. Father's /Guardian's Name: 3. Date of birth:(DD/MM/YYYY) 4. Sex (Male/Female):.... 5. Caste & Categories: General /SC/ST/OBC-A/OBC-B/PH 6. Registration Number:.... 7. Name of the Medical Council: (Registration certificate must be 8. Address: Address for communication: Village/Town:.... P.O:.... P:S..... District: Mobile Number:.... 10. Residential Block/Municipality/MC:.... 11. Academic Qualification (self attested copy of mark sheet must be submitted with the application): Examination Board/University Year of Marks Out of total % of Marks Chances passing obtained marks taken to 1ST MBBS pass 2ND MBBS 3RD MBBS Diploma PG degree Any other qualification 12. Year of experience in health sector only (must have appointment letter and experience certificate) Name of the organization Designation Type of work Year of experience (upto 31/01/2021) Full Signature of the Candidate **Declaration**

I hereby solemnly declare that the information furnished above are based on the material records and are true to the best of my knowledge and believe. If any information furnished or any part of it is found to be incorrect than I understand that my candidature for contractual engagement of the post of Part time Medical Officer of UPHC is liable to be cancelled without any further information to me.

Full Signature of the Candidate