OFFICE OF THE COUNCILLORS BARUIPUR MUNICIPALITY



Address: - Kulpi Road, P.O. & P.S. - Baruipur, District-South 24 Parganas, Kolkata-700144 E-mail: barui 07@yahoo.com, Contact No.: 033-2433 8201

Memo No. 536/BM/Health (Recruitment of H.O.) /2025 Date: 17.07.2025

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

SL No	Name of The Post	No. of Vacancy	Eligibility
1.	HEALTH OFFICER (Contractual Basis)	1 (Unreserved)	 Medical qualifications included in the 1st (First) or 2nd (Second) Schedule or Part-2 of the 3rd (Third) Schedule of the Indian Medical Council Act, 1956 and registration as Medical Practitioner of West Bengal with desirable qualifications of 2(two) years practicing experience. Age Limit – not more than 62 years as on 01st January , 2025

Terms and Condition:

- 1. The contractual remuneration of the Health Officer will be fixed at Rs.62000.00 (Rupees Sixty Two Thousand) only per month.
- 2. The Health Officer shall be engaged on contract initially for period of 1(one) year from the date of joining.
- 3. The Candidates will have to apply in the prescribed Application Format.
- 4. Application Format is to be downloaded from the Website of Baruipur Municipality: **baruipurmunicipality.org.in** and SUDA Website : https://sudawb.org/Emp-Notice
- 5. Candidate should enclose self-attested photocopy of the Age, Address & Qualification etc. certificate with the application.
- 6. No Objection Certificate (NOC) requires for those applicants who are working in any organization / Government Sector.
- 7. The Candidates have to submit their applications through e-mail (**barui_07@yahoo.com**) or **By Post only**. All documents have to be scanned along with the application from in PDF format.
- 8. All communication with candidates will be made through e-mail or Over Telephone only.
- 9. The Last Date for submission of application is 30.07.2025 within 5.00 PM.
- 10. After 5.00 PM no application received by mail or by Post.
- 11. Eligible candidates will be invited for an **interview on 04.08.2025 (Monday) at 02.00 PM** in the **Conference Hall** of Baruipur Municipality to be conducted by the Selection Committee.

Chairman, Baruipur Municipality 8 **Chairman of the Selection Committee Chairman** Baruipur Munucipality

APPLICATION FORM

То

The Chairman, Baruipur Municipality, P.O. & P.S. – Baruipur Dist. – South 24 Parganas Kolkata - 700144 Affix Self attested recent color passport size photo

Application for the post of "Health Officer"

1)	Full Name (In Capital Letters):
2)	Father's / Husband's Name (In Capital Letters) :
3)	Date of Birth (DD/MM/YYYY):
4)	Nationality: Age (As on 1 st January 2025):
5)	Present Address for communication (in Capital Letters)
	Road/Lane
	Police Station, District
	Landmark,
	STATE, PIN CODE
6)	Permanent Address (in Capital Letters)
	Road/Lane, Post Office
	Police Station, District
	Landmark,
	STATE, PIN CODE
7)	Contact No. :
8)	VALID E-mail ID:



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9) Academic Qualifications :

SL No.	Examination Passed	Board /Council/University	Year of Passing	Total Marks	Marks Obtained	Percentage
	x					
	9					
		с.				

10) Additional Qualification (if any) :

11) Working Experience (if any) :

SI No	Name of the Organization	Name of the post	Date of Joining	Date of Leaving	Total Working Period (in years)

I do hereby declare that all the information stated in this application form are true. In case any of my information furnished and document attached hereto is found to be not true and if I fail to produce relevant documents in support of the eligibility criteria, my candidature is liable to be cancelled by the appropriate authority at any stage of the Selection / Recruitment process.

Date :

Place :



Full Signature of the Applicant

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