THE KOLKATA MUNICIPAL CORPORATION 5, S.N. BANERJEE ROAD, KOLKATA - 700 013

The Health Department of Kolkata Municipal Corporation will engage the following personnel as mentioned below for Maternity Home purely on contractual basis through walk-in-interview.

Advertisement No. - H/10/KMC/2023-24 dated-14.03.2024.

The applicant must be a permanent resident of West Bengal and the applicant must have knowledge of local languages.

Name of Post	Number of Post	Essential Qualification	Age Limit	Consolidated Remuneration
Specialist (G&O)		MBBS with Post Graduate Diploma/Degree in Gynaecology & Obstetrics from a MCI recognized Institute/DNB. Must have completed compulsory 1 year Internship and has West Bengal Medical Council Registration.	Upto 67 years as on 1st January 2024	Rs-60,000/-(per month)

Date of Interview & Reporting Time :- 22.03.2024. Time 11.30 am. To 12.00 pm.

Venue of Interview

:- Room No. 254, 2nd Floor, PMU, Kolkata City NUHM Society, 5 S.N.Banerjee Road, Kolkata-700013.

The duty hours of the above recruited Specialist Medical Officer shall be 8 hours.

Interested candidates are requested to visit the official website of KMC www.kmcgov.in to download the Application format and General information.

Kolkata Municipal Corporation (Health Department)

CHIEF MUNICIPAL HEALTH OFFICER KOLKATA MUNICIPAL CORPORATION

The General Information for the Applicants / Candidates are as follows:

- **1.** The applicant must be a permanent resident of West Bengal.
- 2. The applicant must have knowledge of local languages.
- **3.** Application forms not properly filled in or incomplete Application forms are liable to be cancelled.
- **4.** The Essential Qualifications mentioned are the minimum and mere possession of the same dose not entitles the candidate to claim selection. <u>All the essential qualifications must be completed on the date of submission of application.</u>
- 5. The originals & photocopies of each of the following documents stated below must be brought at the time of Interview and enclosed the photocopies of documents with the application.
 - Age Proof of Certificate (Madhyamik or equivalent examination certificate)
 - Certificate of MBBS with Post Graduate Diploma/ Degree / DNB and West Bengal Registration.
 - 1 year compulsory Internship
 - Caste certificate.
 - Photo proof Identity card (Passport or Voter ID)
 - Proof of Address (Passport or Voter ID or Aadhaar ID)
- **6.** The decision of the competent authority regarding the engagement will be final.
- **7.** Office of the Chief Municipal Health Officer reserves the right to change/modify any/all of the above conditions

Kolkata Municipal Corporation (Health Department)

CHIEF MUNICIPAL HEALTH OFFICER KOLKATA MUNICIPAL CORPORATION

Kolkata Municipal Corporation (Health Department) 5, S.N. Banerjee Road Kolkata - 13

Write a phone no. back side of photo & attached elf Signature

Application Format for the post of Specialist Medical Officer (G&O) for Maternity Home. Advertisement No -H/10/KMC/2023-24, dated 14.03.2024

	Name in full (in	a capital letters):							
2.	Guardian's Name:								
3.	Or equivalen	h according to Madh it examination certif 1.01.2024:	-	_/					
4.	Are you Physica	ally Handicapped, w	rite Yes or No:						
5.	Caste Category:	(UR/SC/ST/OBC-A/	OBC-B) of West Be	ngal:					
6.	Postal Address	(in Capital Letters) :							
7.	Permanent add	ress (in capital lette	rs):						
8.	8. Contact No:								
9.	Email Id :								
10	. Whether citizer	n of India and perma	nent resident of	West Ben	gal, write Yes	s or No:			
11	. Existing Emplo	yer's Name (if any) v	with date of joinin	ıg:					
4.0									
12	. If Joined KMC	Office earlier then m	nention date of joi	ning:					
	. If Joined KMC . Educational/Q		nention date of joi	ning:					
13 Nam	. Educational/Q ne of the Exam	ualifications: Name of the	nention date of joi Registration No	Full	Marks	% of	Year of		
13 Nam	. Educational/Q	ualifications:			Marks Obtained	% of Marks	Year of Passing		
13 Nam	. Educational/Q ne of the Exam	ualifications: Name of the		Full					
13 Nam	. Educational/Q ne of the Exam	ualifications: Name of the		Full					
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