

ABRIDGED ADVERTISEMENT

Howrah Municipal Corporation
Howrah Urban Health Society
Notice for Walk-In Interview

Memo No: H-125/24-25

Date: 31/08/24

Walk-in interview for recruitment of 20nos Part Time Medical Officers (MBBS from MCI recognized institute with 1 year compulsory internship & Registered under West Bengal Medical Council) under **National Urban Health Mission** will be held on **11.09.2024** from 2pm at **Pranab Mukherjee Savagriha (Conference Room)** of HMC. The details of eligibility criteria, terms & conditions of recruitment, emoluments etc will be available at "Health Department" HMC and below mentioned website.

Website: www.myhmc.in

Sd/-
Commissioner
Howrah Municipal Corporation
&
Vice Chairman
Howrah Urban Health Society



HOWRAH MUNICIPAL CORPORATION

Howrah Urban Health Society

4, Mahatma Gandhi Road, Howrah – 711 101.

Phone: 2638 3211-13, Fax: 2641 2214/5846/5218.

Email : health.howrahmc@gmail.com



Howrah Urban Health Society will engage Part Time Medical Officers as mentioned below for its Urban Primary Health Centres in Howrah City area purely on contractual basis through walk in interview.

Advertisement no: H-125/24-25 ,dated: 31/08/2024

A) Name of the post : **Medical Officer (Part Time)**

Number of Post : **20 Nos**

Consolidated Remuneration : **Rs. 24,000/- (Twenty Four Thousand) per month**

Essential Qualification :

- **MBBS from a MCI recognized Institute with 1 year compulsory Internship**
- **Registered in West Bengal Medical Council**
- **Age Limit : Upto 67 years or less as on 01.01.2024**

Date of Interview / Reporting Time : **11th September, 2024 from 2PM**

Venue of Interview : **Pranab Mukherjee Savagriha (Conference Room)**

Interested candidates are requested to visit the official website of HMC –to <https://www.myhmc.in/> download application format and general information.


31/08/24
OSD-H (Admin)

**Howrah Municipal Corporation
&
Secretary-Howrah Urban Health Society**

The general Information for the Applicants / Candidates are as follows

1. Application forms not properly filled in or incomplete application forms are liable to be cancelled.
2. The essential Qualifications mentioned are the minimum and mere possession of the same does not entitle the candidate to claim selection. All the essential qualification must be completed on the date of submission of application.
3. **The original photocopies of each of the following documents stated below must be brought at the time of Intrview and enclosed the photocopies of documents with the application.**
 - Age Proof Certificate (Madhyamik or equivalent examination certificate)
 - Certificate of MBBS and West Bengal Registration
 - Certificate of Madhyamik or Higher Secondary
 - Proof of Address (Passport or Voter or Adhaar ID)
 - Proof of Identity (Passport or Voter ID)
4. The decision of the competent authority regarding the engagement will be final.
5. The Howrah Urban Health Society reserves the right to change / modify any / all of the above conditions.

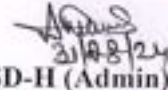

OSD-H (Admin)
Howrah Municipal Corporation
&
Secretary-Howrah Urban Health Society

Photo
attach

Application Format for the Post of Part Time Medical Officer

- 1) Name in full (Block Letter) : _____ :
- 2) Guardian's Name : _____ :
- 3) a) Date of birth (according to Madhyamik
or equivalent examination certificate) : _____
b) Age as on 01.01.2024 : _____ :
- 4) Are you physically handicapped? : _____ :
- 5) Caste: _____ :
- 6) Postal Address (in capital letters) to which
Communication should be sent : _____ :
- 7) Permanent Address (in capital letters) : _____ :
- 8) Contact No: _____ :
- 9) Email ID: _____ :
- 10) a) Whether citizen of India , write Yes or No : _____
b) Whether natural citizen of India or citizen by registration _____
- 11) Educational Qualification :

Name of the Examination	Name of the Board / University	Full Marks	Marks obtained	% of Marks	Division / Grade	Year of passing

- 12) Professional / other Qualifications or Specialization :

Name of the Examination	Name of the Board / University	Registration No	Full Marks	Marks obtained	% of Marks	Year of passing

13). Details of Experience (If any) :

I do hereby declare that all statements made in this application form are true, complete and correct to the best of my knowledge and belief. In the event of any information being found suppressed/ false or incorrect, or if my ineligibility is detected being false, my candidature will stand cancelled.

Place :

Date :

Full Signature of the candidate