Phone No. (03217) 265-412, 265-316 & 265-224 E-mail: <u>health.basirhatmunicipality@gmail.com</u>

Memo No: BM-630

E-mail: <u>basirhatmunicipality@yahoo.com</u> Website: <u>www.basirhatmunicipality.in</u>



SARAT BISWAS ROAD, BASIRHAT, NORTH 24 PARGANAS

Dated, Basirhat: 13/06/2025

Recruitment notification for selection of Part Time Medical Officer under NUHM

Applications are invited for recruitment to the post of Part Time Medical Officer under NUHM (National Urban Health Mission) at three UPHCs under Basirhat Municipality. The criteria for appointment and remuneration of the post are as follows:

Name of the Post	Programme	Vacancy	Monthly Consolidated Remuneration
Part Time Medical Officer (PTMO)	NUHM	03 (Three)	Rs. 24000/- (Rupees Twenty Four Thousand) per month.

Eligibility criteria of Part Time Medical Officer (PTMO):

(1)	Essential Qualification:	MBBS from a MCI recognized Institute with one year compulsory Internship. Must be registered under West Bengal Medical Council.	
(2)	Age Limit:	Up to 67 Years.	

Application along with self attested photo copies of the relevant documents mentioned in SI. No. (i) to (V) below should be sent by Registered Post, or may be submitted personally at the office of the Municipality within 10 days from the date of publishing the Advertisement. The application shall be addressed to the to The Chairperson, Basirhat Municipality, Sarat Biswas Road, Basirhat, North 24 Parganas, Pin. 743411.

Relevant Documents:

- (i) Certificate of MBBS and Registration.
- (ii) Certificate of completion of 1 year compulsory internship.
- (iii) Age proof Certificate.
- (iv) Photo ID proof (Passport or Aadhaar or Voter ID).
- (v) Address proof (Passport or Aadhaar or Voter ID).

The recruitment is purely contractual and temporary and the decision of the competent authority regarding the engagement will be final.

Memo No.

Date: ____

Copy forwarded for information to:

- 1. A.D.M. Basirhat, North 24 Parganas.
- 2. Sub-Divisional Officer, Basirhat, North 24 Parganas.
- 3. Chief Medical Officer of Health, Basirhat Health District, Basirhat.
- 4. Dy. CMOH-III, Basirhat Health District, Basirhat.

Chairperson Basirhat Municipality

Chairperson Basirhat Municipality Chairperson

BASIRHAT MUNICIPALITY

BASIRHAT MUNICIPALITY

APPLICATION FOR ENGAGEMENT AS A PART TIME MEDICAL OFFICER

То

The Chairperson Basirhat Municipality Basirhat, North 24 Parganas Pin- 743411

- 1. NAME:
- 2. FATHER'S/ HUSBAND'S NAME:
- 3. DATE OF BIRTH:
- 4. ADDRESS:
- 5. CONTACT NO. & EMAIL ID:
- 6. QUALIFICATION: (As per IMC Act-1956)
- 7. REGISTRATION NO. OF WBMC:
- 8. SPECIALIST IN THE DISPLINE, IF ANY:
- 9. EXPERIENCE:

I do hereby declare that the information furnished above are true to the best of my knowledge and belief and that, if any stage, it is found that any of the above material information is false/ incorrect or is suppressed by me, my engagement is liable to rejected/ terminated.

Date:

Affix self attested Photograph Signed across

(Full Signature of the Applicant)