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 Polyclinics

Under XV Finance Commission Health Grant, purely on contractual basis through walk-in-interview

Advertisement No. – H/02/KMC/2023-24 Dated-15.07.2023.

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)	3	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 2023	Rs-3,000/-per day (3 hours per day for thrice a week)		
Specialist (Medicine)	8	MBBS with Post Graduate Diploma/Degree in General Medicine 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 2023	Rs-3,000/-per day (3 hours per day for thrice a week)		
Specialist (Paediatrics)	4	MBBS with Post Graduate Diploma/Degree in Paediatric Medicine 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 2023	Rs-3,000/-per day (3 hours per day for thrice a week)		
Specialist (Ophthalmologist)	7	MBBS with Post Graduate Diploma/Degree in Ophthalmology 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 2023	Rs-3,000/-per day (3 hours per day for twice a week)		
Specialist (Cardiology)	10	MBBS with Post Graduate Diploma/Degree/ in Cardiology 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 2023	Rs-3,000/-per day (3 hours per day for thrice a week)		
Specialist (ENT)	5	MBBS with Post Graduate Diploma/Degree in ENT 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 2023	Rs-3,000/-per day (3 hours per day for thrice a week)		
Specialist (Endocrinology)	11	MBBS with Post Graduate Diploma/Degree in Endocrinology 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 2023	Rs-3,000/-per day (3 hours per day for thrice a week)		
Specialist (Orthopaedics)	12	MBBS with Post Graduate Diploma/Degree in Orthopendics 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 2023	Rs-3,000/-per day (3 hours per day for twice a week)		

Date of Interview & Reporting Time :- 19.08.2023. 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 vacancy may vary at the time of Interview

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)
- **4.** The decision of the competent authority regarding the engagement will be final.
- **5.** 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

Application Format for the post of Specialistfor Polyclinic.

1. Name in full	Name in full (in capital letters):											
2. Guardian's	Guardian's Name:											
 3. a) Date of Birth according to Madhyamik:// Or equivalent examination certificate b) Age as on 01.01.2023: year. 4. Are you Physically Handicapped, write Yes or No: 												
5. Caste Catego	. Caste Category: (UR/SC/ST/OBC-A/OBC-B) of West Bengal:											
Communica PO, Sub-Di 7. Permanent a	 6. Postal Address (in Capital Letters) to which Communication should be sent (mentioning PO, Sub-Division, District, Pin Code) 7. Permanent address (in capital letters): 											
	8. Contact No:9. Email Id :											
 Email Id : Permanent Resident of West Bengal, write Yes or No: 												
11. Existing Employer Name (if any):												
12. Joining Date of Existing Employer:												
	/Qualifications:	- 11	2.4	0,4	5							
Name of the Exam	Name of the Board/University	Full Marks	Marks Obtained	% of Marks	Division/ Grade	Chances taken to pass	Year of Passing					
	, ,											
14. Professional	/ Other Qualification	ons or Sp	ecialization	:								
Name of the Exam	Name of the	Registration No		Full	Marks	% of Marks	Year of					
MBBS & MD/MS	Board/University			Marks	Obtained		Passing					
15. Declaration:												
statement found fal	clare that all the sta lse at the time of exa ed or my service will	aminatio	n/interview	or after								