STD No.: 03215, Phone: 255021, 255025, Fax: 257641 E-mail . chairmanbm@gmail.com Website : www.bongaonmunicipality org

Office of the Bongaon A **BONGAON, NORTH 24 PARGANAS.**

Sri. Gopal Seth (Ex-MLA)

CHAIRMAN **BONGAON MUNICIPALITY** M.: 9564219492 // 9333345338 e-mail: gopalsethxmla@gmail.com



Memo No.: 3-1482

Dated: 12-05-202

To

The Director, SUDA , "ILGUS BHAVAN", H.C. Block, Sec-III, Salt Lake, Kolkata-700106

'Sub: Notification of vacancy for the post of Honorary Health Worker (HHW) of Bongaon Municipality.

Sir,

With reference to the above undersigned is sending the above-noted notification for the post of Honorary Health Worker (HHW) of Bongaon Municipality.

You are requested kindly to take necessary action for uploading the notification in the departmental website for wide circulation.

Thanking you.

Bongaon Municipality

Enclo: As stated above.

Memo No. 13. M. 1482/1 (8)

Date-12-05-2022

Copy for information to-

- 1. The Principal Secretary, UD&MA Department, Govt. of West Bengal, NAGARAYAN, Nagarayan, DF-8, Sector-I, Salt Lake, Kolkata -700064.
- 2. The District Magistrate, North24Parganas.
- 3. The C.M.O.H., North24Parganas.
- 4. The SDO, Bongaon, North24Parganas.
- 5. The Executive Officer, Bongaon Municipality.
- 6. The Finance Officer of the Bongaon Municipality.
- 7. Receiving Clerk, Bongaon Municipality is directed to hang this employment notice on the Office Notice Board.
- 8. I.T. Coordinator. Bongaon Municipality is directed to upload this employment notice in the office website (www.bongaonmunicipality.org)

Bongaon Municipality

BONGAON MUNICIPALITY

Advertisement No.- BM/ 1481 Closing Date- 02.06.2022

Dated- 12.05.2022

Application are invited from the eligible women candidates (married / divorced / widow) who must be a resident of this Municipality to fill up the vacancies of the post of Honorary Health Workers (HHWs) as per terms and conditions stated below:-

- 1. Name of the post: Honorary Health Worker (HHW)
- 2. No. of Vacancy: 1(One)
- 3. The Candidate must be the resident of Bongaon Municipality.
- 4. Age: 30-40 years as on 1st day of the calendar year i.e. as on 01.01.2022. In case of SC / ST / OBC (A / B) candidates, the lower age limit may be relaxed to 22 years. As such candidates belonging to SC/ST/OBC (A/B) may apply whose age is between 22-40 years.
- 5. Educational qualification: Minimum Madhyamik or equivalent examination pass. Candidates having higher qualification are also eligible. However, in case of candidates possessing higher qualification, only marks obtained in Madhyamik or equivalent examination will be considered. For calculation of the marks obtained in the Secondary Examination (Madhyamik or equivalent), the aggregate is to be considered (excluding the marks obtained in the additional paper).
- 6. Candidates having motivation/ experience rendering social service.
- 7. Terms & Condition:
- O. Monthly honorarium of the HHW will be Rs. 4,500/- (Rupees Four thousand Five hundred only) per month.
- **O.** The HHW shall be engaged on contract initially for a period of 1 (one) year on probation from the date of joining of each HHW and shall be extended further on the basis of satisfactory performance and on obtaining approval for extension from the UD & MA Department.
- O. The 'candidates will have to apply in the prescribed Application Format. Application Format is to be downloaded from the Website of Bongaon Municipality (www.bongaonmunicipality.org).
- O. Candidate should enclose self attested copy of Proof of Age (Madhyamik Admit card), proof of residence (Aadhaar Card / Voter ID / Ration Card), Mark sheet of Madhyamik or equivalent examination as applicable, proof of SC / ST I OBC-A / OBC-B in case of SC / ST / OBC-A / OBC-B candidates, as per certificate issued by the Sub Divisional Officer / DWO. Kolkata.
- O. Candidate should be married/divorced/widow

Executive Officer
BONGAON MUNICIPALITY

- O. Candidate also enclose self attested copy of Marriage Certificate / Voter Card / Ration Card / Aadhaar Card mentioning the husband name for married candidates, Death Certificate of husband for widows and Order of Hon'ble Court order for divorce, if any for divorcees.
- O. All applications must be addressed to the Chairman / Executive Officer of Bongaon Municipality and also are to be submitted physically at the Municipal Office within working days at the designated drop box from 11 a.m. to 5 p.m.

Contd. on next page

- **O.** The last date for submission of application is 02.06.2022 within 5.00 PM. After that no application will be received or entertained.
- 8. The selection would be based on –
- **O.** Eligible candidates to be called for interview in the ratio of 1:20 for every vacancy of HHW based on the marks obtained in the Madhyamik or equivalent examination.
- O. Marks obtained by the candidate in the Madhyamik or equivalent examination (90% weightage).
- O. Score in the interview (10% weightage)
- **O.** Final merit list should be prepared based on marks obtained by the candidate in the Madhyamik or equivalent examination and score secured in the interview taken together.
- 9. No TA/ DA will be allowed to attend the interview.

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Executive Officer
Bongaon Municipality
Executive Officer
BONGAON MUNICIPALITY

Application Form

Application No. (For Office Use Only)

PASTE (Do not Pin or Staple here). Recent pass port size colour photograph of size 3.5 cm X 3.5 cm. The Colour photograph should not be more than 3 months old.

PLEASE FILL UP THE APPLICATION IN CAPITAL LETTER (Except Signature)

Advertisement No. BM /1481

<u>Dated</u> - 12.05.2022

Application for the post of Honorary Health Worker (HI	IW), Bongaon Municipality
1. Name (In Capital Letter):	
FIRST NAME:	
MIDDLE NAME:	
SURNAME:	
SUKNAME,	
2. Father's / Husband's Name (In Capital Letter):	
2) 5 4 7 5 6 5 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
3) DATE OF BIRTH (DD/MM/YYYY)	
4) Age as on 01.01.2022 Years	Months
5) Marital Status (Married / Divorced/Widow):	
by Maritan Status (Married / Divorced/ Widow).	
6) Nationality:	
7) Address:	
PERMANENT ADDRESS (In Capital	
Letter):	
P.O:	
Town / City:	
Municipality: Ware	1 No:
District:	
District :	
State:	

Pin Code:

Municipality: District: State: Pin Code: • 8) Contact Details:		Wa	rd No:	
• State: Pin Code: •				
Pin Code: •				
R) Contact Details .				
5) Contact Details.				
. Mobile Number:				
i. Residence :				

ii. E- mail id				
) Academic Qualification (Madhyamik or e	quivalent and	onwards):		
SI. School/ Board/ University/ Degr	ee/ Diploma	Year of passing	Duration	Percentage
No. Institute	eer Bipioilia	1 car or passing	Duration	Percentage of marks obtained
2				
*			****	

12) Language Known:	(PLEASE TICK)
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Sl. No.	Language	WRITING	READING	SPEAKING

13) Check List of documents: (PLEASE TICK IN THE BOX)

SI. No.	Documents	Y/N	No. of documents enclosed (Photocopies)
Ls	Proof of age (Madhyamik Admit Card)		
2.	Proof of Academic Qualification		
3.	Proof of residence (Aadhaar Card/EPIC/Ration Card)		
4.	Caste Certificate		
5.	Others i) For married candidate — Marriage Certificate / Voter Card / Ration Card / Aadhaar Card mentioning the husband name ii) For widow candidate — Death Certificate of husband iii) For divorced candidate — Court order for divorced, if any		

Declaration:

I hereby declare that I have carefully read the conditions of eligibility mentioned in the advertisement. These conditions are acceptable to me and I fulfill these conditions. The details mentioned in the Application are true and I shall furnish the necessary documents in original whenever required.

If any information/ details found to be incorrect / false at any stage of the selection process or if any fact found to have been concealed by me or detected even after the appointment, my engagement likely to be terminated.

nkery to be terminated.	
Date:	
DI	
Place:	Full Signature of the Candidate