



ULUBERIA MUNICIPALITY
O.T ROAD, BAZARPARA, ULUBERIA, HOWRAH – 711315
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URL: uluberiamunicipality.org



Memo No.- UM/Health/.....1606

Date:-19.04.23

Walk-In Interview for selection of Retired Sanitary Inspectors

Walk-In Interview for engagement of Retired Sanitary Inspectors under **Uluberia Municipality**. The interested and eligible candidates may visit our website www.uluberiamunicipality.org for details.

- **Name of the post** : Retired Sanitary Inspectors
- **Number of Post** : 1 Nos.
- **Consolidated Remuneration** : Rs. 20,000/- (Twenty Thousand) per month
- **Essential Qualification** : Retired Sanitary Inspectors
- **Age Limit** : Upto 64 years or less as on 01.01.2023
- **Date of Interview / Reporting Time** : 15.05.2023 at 11:00 A.M.
- **Venue of Interview** : Uluberia Municipality (Conference Room), Bazarpara, Uluberia, Howrah

The general information for the Applicants / Candidates are as follows

- ❖ Application forms not properly filled in. Incomplete application forms are liable to be cancelled.
- ❖ The candidates must bring under noted original & self-attested photocopied documents at the time of Interview with their application form.
- ❖ Proof of Identity (Passport or Voter ID or Aadhaar Card or PAN Card)
- ❖ Proof of Address (Passport or Voter ID or Aadhaar Card)
- ❖ Proof of Age (Madhyamik or equivalent examination Admit Card/Pass Certificate)
- ❖ All mark sheets and pass certificates starting from Secondary onwards (including SI Training Certificate etc.)
- ❖ Proof for retirement from services as Sanitary Inspector and Xerox copy of P.P.O.
- ❖ The decision of the competent authority regarding the engagement will be final.
- ❖ 100 point roster will not be applicable for filling up the vacancy.
- ❖ The Uluberia Municipality reserves the right to change / modify and cancel the date of interview.
- ❖ The recruitment is purely on contractual and temporary basis initially upto 30th November, 2023.
- ❖ The selected candidate will not be entitled for considering permanent job against the said post.
- ❖ The candidate may be terminated at any time if false documents are found to submit.



Unmoudal
Finance Officer
& Convenor Municipal level Selection Committee
Uluberia Municipality
Date:-19.4.23

Memo No.- UM/Health/.....

Copy forwarded for kind information and taking necessary action to:

1. Addl. Secretary, UD & MA Dept. & Addl. Director, SUDA, Govt. of WB
2. The District Magistrate, Howrah
3. The Chairman, Uluberia Municipality
4. The CMOH, Howrah
5. The ACMOH, Uluberia
6. The Officer In charge, I&CA Dept. Uluberia- with request for wide circulation.
7. The All C-I-C Member, Uluberia Municipality
8. The Executive Officer, Uluberia Municipality
9. The Finance Officer, Uluberia Municipality
10. The Head Clerk, Uluberia Municipality
11. The IT Co-Ordinator, Uluberia Municipality for website uploading.
12. Office copy

Finance Officer
& Convenor Municipal level Selection Committee
Uluberia Municipality

12. Employment Record:**(Total years of post-qualification experience) :****13. Details of Employment: (Use separate sheets if required).**

Starting with your present employment, list in reverse order all the employments you have had.

13 A. Current Employment:

Name of Employer:

From Month / Year	To Month / Year	<u>Designation</u>

Location of Employment:

Description of your duties:**13 B. Previous Employment:**

Name of Employer:

From Month / Year	To Month / Year	Designation

Location of Employment:

Description of your duties:**13 C. Previous Employment:**

Name of Employer:

From Month / Year	To Month / Year	Designation

Location of Employment:

Description of your duties:**Declaration**

I hereby solemnly declare that the information furnished above are based on material records and are true to the best of my knowledge and belief. If any information furnished or any part of it is found to be incorrect, then I do believe and understand that my candidature for contractual recruitment to the post I have applied for is liable to be cancelled without any further intimation to me.

Place :**Date :****Signature of the Applicant**