

# THE KOLKATA MUNICIPAL CORPORATION

5 S.N. Banerjee Road, Kolkata – 700 013

Advertisement No. – H/06/KMC/2025-26 dated-16.01.2026.

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.

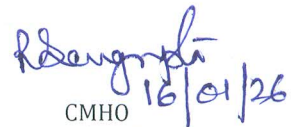
**The applicant must be a permanent resident of West Bengal and the applicant must have knowledge of local languages.**

Name of Post	Number of Post	Essential Qualification	Age Limit	Consolidated Remuneration
Specialist (G&O)	14	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 2026	Rs-3,000/-per day (3 hours per day for thrice a week)
Specialist (Medicine)	16	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 2026	Rs-3,000/-per day (3 hours per day for thrice a week)
Specialist (Paediatrics)	16	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 2026	Rs-3,000/-per day (3 hours per day for thrice a week)
Specialist (Ophthalmologist)	18	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 2026	Rs-3,000/-per day (3 hours per day for <b>twice</b> a week)
Specialist (Cardiology)	01	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 2026	Rs-3,000/-per day (3 hours per day for thrice a week)
Specialist (Radiology)	03	MBBS with Post Graduate Diploma/Degree/DNB in Radiology from a MCI recognized Institute. Must have completed compulsory 1 year Internship and has West Bengal Medical Council Registration.	Upto 67 years as on 1st January 2026	Rs-3,000/-per day (3 hours per day for thrice a week)
Specialist (ENT)	07	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 2026	Rs-3,000/-per day (3 hours per day for thrice a week)
Specialist (Orthopaedics)	02	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 2026	Rs-3,000/-per day (3 hours per day for <b>twice</b> a week)

Date of Interview & Reporting Time :- 30.01.2026. Time 11.30 am. To 12.30 pm.

Venue of Interview :- Room No. 254, 2nd Floor, PMU, Kolkata City NUHM Society, 5 S.N.Banerjee Road, Kolkata-700013.

Interested candidates are requested to visit the official website of KMC [www.kmcgov.in](http://www.kmcgov.in) to download the Application format and General information.

  
CMHO 16/01/26

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 does not entitle the candidate to claim selection. All the essential qualifications must be completed on the date of submission of application.
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)
6. The decision of the competent authority regarding the engagement will be final.
7. Office of the Chief Municipal Health Officer reserves the right to change/modify any/all of the above conditions

*R. Sengupta*  
16/01/26

CMHO

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

*Self Signature*

**Application Format for the post of Specialist .....for Polyclinic.**  
**Advertisement No -H/06/KMC/2025-26, dated 16.01.2026**

1. Name in full (in capital letters):
2. Guardian's Name:
3. a) Date of Birth according to Madhyamik: \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
Or equivalent examination certificate  
b) Age as on 01.01.2026: \_\_\_\_ year.
4. Are you Physically Handicapped, write Yes or No:
5. Caste Category: (UR/SC/ST/OBC-A/OBC-B) of West Bengal:
6. Postal Address (in Capital Letters) : .....
7. Permanent address (in capital letters): .....
8. Contact No:
9. Email Id :
10. Whether citizen of India and permanent resident of West Bengal, write Yes or No:
11. Existing Employer's Name (if any) with date of joining:
12. If Joined KMC Office earlier then mention date of joining:
13. Educational/Qualifications:

Name of the Exam MBBS/MD/Dp/De	Name of the Board/University	Registration No	Full Marks	Marks Obtained	% of Marks	Year of Passing

14. West Bengal Medical Council Registration No:
15. Experience:
16. Declaration:

I do hereby declare that all the statements given above by me are true and correct in all respect. If any statement found false at the time of examination/interview or after my appointment then my candidature will liable to be cancelled or my service will terminate automatically.

Place :

Date :

Full Signature of the Candidate