THE KOLKATA CITY NUHM SOCIETY 5, S.N. BANERJEE ROAD, KOLKATA - 700 013

Advertisement No. -3/Kolkata City NUHM Society / 2015-16

Kolkata City NUHM Society will engage personnel as mentioned below for its PMU purely on contractual basis.

Name of the post: Accounts Manager

No. of Post: 1(Unreserved)

Qualification: M.Com/ICWA/CA.Should have knowledge of double entry accounting

system and knowledge of Tally 7.2/8.1 version

Experience: 2 years experience in Accounting System

Remuneration: Rs.23, 270 per month

Place of posting: Any where in Kolkata.

Age (as on 01.01.15): 40 years

Mode of Selection:

Total 100 Marks

SI. No	Name of the Post	Basic Qualification	PG Degree/Diploma		Computer Test	Experience	Interview
1	Accounts Manager	60(based on % of	Degree	Diploma	15	10	15
		marks obtained in the final examination.	NA	NA			

Selection will be done on merit, interview and practical examination. Applications will be shortlisted on the basis of obtaining marks in the final examination (highest basic qualification). For one declared post 10 candidates will be called for viva and practical from the prepared shortlist. In Computer Test which will count as practical, candidates will have to obtain at least 50% marks to qualify for the post.

The eligible candidates should submit their application at the office of Kolkata City NUHM Society Address: Room No.147,5, S.N BANERJEE ROAD, KOLKATA – 700 013 in the prescribed format. They are also requested to carry a photocopy of the filled in application format at the time of submission of application.

The time and date of submission of application: 19.11.2015 - 28.11.15. Within

working hours.

Secretary - Kolkata City NUHM Society

The General Information for the Applicants / Candidates may be as follows:

- 1. Application forms not properly filled in or incomplete Application forms are liable to be cancelled.
- 2. The Essential Qualifications mentioned are the minimum and mere possession of the same dose not entitles the candidate to claim selection. All the essential qualification must be completed on the date of submission of application.
- 3. The originals of each of the following documents stated below must be brought <u>at the time of original testimonial verification:</u>
 - Photo proof Identity card (Passport or Voter Id)
 - Proof of Address (Passport or Voter Id)
 - Age Proof of Certificate (Madhyamik or equivalent examination certificate)
 - All mark sheets & pass certificates of all the essential academic qualification.
 - All the experience certificates issued and stamped by the appropriate authority starting from oldest to latest.
 - Experience will be calculated after obtaining the required qualification
 - Experience certificates must consist of Name of the post, Employer's Name, Employee's Name, Date of Joining (DOJ), Date of Leaving(DOL) otherwise his/her experience will treated as invalid. No appointment letter/joining letter will be treated as experience certificate.
 - No rounding off of marks will be granted. Proportionate marking upto 2 decimal points will be considered.
 - The decision of the competent authority regarding the engagement will be final.
 - The Kolkata City NUHM Society reserves the right to change/modify any/all of the above conditions

Kolkata City NUHM Society

Secretary - Kolkata City NUHM Society

Kolkata City NUHM Society 5, S.N. BANERJEE ROAD KOLKATA - 13

APPLICATION FORMAT FOR THE POST OF ACCOUNTS MANAGER

PHOTO (self attested)

- 1. Name in full (Block Letters):
- 2. Guardian's Name:
- 3. a)Date of Birth according to Madhyamik Or equivalent examination certificate b)Age as on 1.1.2015
- 4. Are you physically handicapped?
- 5. Postal Address (in Capital Letters) to which Communication should be sent (mentioning PO, Sub-Division, District, Pin Code)
- 6. Contact No.
- 7. Email id:
- 8. Permanent address (in capital letters):
- 9. a) Whether citizen of India, write Yes or No:
 - b) Whether a natural citizen of India or citizen by registration
- 10. Educational/ Qualifications:

Class X onwards

Name of the Exam	Name of the Board/Univer sity		Division/Grade	Chances taken to Pass	

11. Professional / Other Qualifications or Specialization:

Name of the Exam	Name Board/		Registration No	Marks Obtained	% of Marks	

Details of Experience:

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:

Full Signature of the candidate

Date: