

RAGHUNATH AYURVED MAHAVIDYALAYA & HOSPITAL



Organised by : Ayurved Sevak Sangha

Reg. No. – S/2571 Dt.3/8/56 Under Society Registration Act. XXI of 1860

Recognised by : CCIM /NCISM & Approved by: AYUSH (New Delhi), Govt. Of India

Affiliated by: The West Bengal University of Health Sciences

P.O & P.S: Contai :: Dist. – Purba Medinipur (W.B.):: Pin - 721401 :: Phone No. (03220) 289255

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Ref. No. R.A.M.H./1511/26

Date: 28/09/2026

NOTIFICATION

Application in prescribed format attached with all relevant documents (self attested photocopies) is invited from BAMS qualified candidates on or before 06.10.2026 at 4 pm for engagement in the post of Resident Medical Officer (RMO) to be engaged at Raghunath Ayurved Mahavidyalaya and Hospital, Contai, Purba Medinipur. A walk-in-interview will be held in the office of the undersigned on **13.10.2026 at 11 am**. The post is purely on temporary contractual basis and may be terminated with one month prior notification from either side. Candidates appeared in the interview will not be entitled TA/DA or any other allowances.

Post description:

Name of the post: Resident Medical Officer

Qualification: Ayurvedacharyya BAMS from recognized University

Desired experience: Clinical experience as well as higher qualifications, if any.

Preference: Preference will be given for the candidates passed from Raghunath Ayurved Mahavidyalaya and Hospital.

Duty: Selected candidate have to work round the clock

Tuhin Kanti Biswas
28/9/2026

Prof. (Dr.)Tuhin Kanti Biswas
Principal-Superintendent

Principal Superintendent
Raghunath Ayurved
Mahavidyalaya & Hospital
Contai, Purba Medinipur (W.B.)

Application form for the post of Resident Medical Officer

Passport
photo of the
candidate.

1. Name of the post applied for:
2. Name in full (in capital letters):
3. Father's / Guardian's Name:
4. (a) Date of Birth according to Madhyamik or Equivalent examination certificate:

(b) Age as on 01-01-2026

Year	Month	Days

5. Sex (Male or Female):
6. Single or Married:
7. Postal address (in capital letters) to which communication will be made:
8. Permanent address (in capital letters):
9. Phone No. / Mobile No.
10. E-mail:
11. Whether citizen of India:
12. Educational Qualifications (attached extra sheets if necessary):

Name of the Examinations passed	Name of the Degree/ Diploma/Certificate	Name of the Board/ University/ Institute	Full Marks	Marks obtained	% of Marks	Year of passing
(Ayurvedacharya, BAMS)						
Higher qualification, if any						
Other relevant information						

13. Registration Details:

Name of the Council	Registration Number	Registration Date	Renewal Date, if applicable

14. Working Experience (attached extra sheets if necessary):

Type of Experience	Name of the Office	Designation	Date of Appointment	Period of Experience

Declaration: I hereby solemnly declare that the information furnished above is based on material records and is true to the best of my knowledge and belief. If any information furnished or any part of it is found to be incorrect, my candidature for engagement to the post of **Resident Medical Officer** on a contractual basis is liable to be cancelled without any further intimation to me.

Date:

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Full signature of the candidate