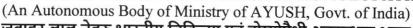
केंद्रीय होम्योपैथी अनुसन्धान परिषद्

(स्वायत् निकाय आयुष मंत्रालय् भारत सरकार)









Jawahar Lal Nehru Bhartiya Chikitsa Avum Homoeopathy Anusandhan Bhawan 61-65 संस्थागत क्षेत्र ,डी-ब्लॉक के सामने ,जनकपुरी ,नई दिल्ली - 110058 61-65, Institutional Area, Opp. D-Block, Janakpuri, New Delhi - 110058

Advt. No. 68/2023-24

Dated: 30.05.2023

Engagement of Senior Research Fellow (Statistics) on contract basis

The Central Council for Research in Homoeopathy, New Delhi intends to engage 02 (two) Senior Research Fellows (Statistics) at a fixed remuneration of Rs. 35,000/per month plus H.R.A. purely on contract basis through test/walk-in-interview on 08.06.2023 (Thursday) at 9.30 a.m..

The details about place of posting; essential qualification, experience, remuneration, etc. are available on the website of the Council. namely. www.ccrhindia.nic.in.

Research Officer (H)/S-4

The Central Council for Research in Homoeopathy intends to engage one (01) Senior Research Fellow (Statistics) purely on contract basis through test/walk-in-interview as per details given below:

| Name and No. of the post | Senior Research Fellow (Statistics) - 02 | | | | | | | |
|------------------------------------|--|--|--|--|--|--|--|--|
| Qualification/experience required: | Essential: i) Master's Degree in Science in Statistics/Biostatistics from a recognized University/Institute. ii) 03 (three) years research experience as JRF/SRF (Statistics) Desirable: i)NET/GATE/RET qualified candidates will be given preference. | | | | | | | |
| | ii)Knowledge of basic computer operation. | | | | | | | |
| Age | Not exceeding 35 years as on the date of interview. | | | | | | | |
| Emoluments (per month) | Rs. 35,000/- (Consolidated) plus H.R.A. as per rules | | | | | | | |
| Period of Engagement | Initially for a period of 06 months but is likely to be extended. | | | | | | | |
| Place of Posting | Central Council for Research in Homoeopathy, New Delhi | | | | | | | |
| Date, Time and Venue of | Date: 08.06.2023 (Thursday) | | | | | | | |
| Interview | Reporting Time: 9.30 a.m. to 10.30 a.m. | | | | | | | |
| | Venue: Central Council for Research in Homoeopathy, | | | | | | | |
| | 61-65, Institutional Area, D-Block, Janakpuri, New Delhi- | | | | | | | |
| | 110058. + | | | | | | | |
| | Tel. No. 011-28524415, 28521162 | | | | | | | |

General Instructions:

- 1 The candidate who fulfils the requirement may attend the Interview alongwith the application in the format attached as **Annexure-I** with self-attested photocopies and original certificates of qualification, experience, mark sheets, birth certificate, passport size photograph.
- 2 The candidates will be engaged against different programmes of the Council and duties will be assigned, including field duties, accordingly.
- 3 The candidate should have working knowledge of computer programmes such as MS-Office, Internet and e-mail, etc. as he would be required to work independently.
- 4 The selections will be made for the Institute/Unit/office as indicated in the advertisement. Once posted, the candidate will not normally be transferred. However, the Council reserves the right to transfer candidates in any other Institutes/Units of the Council.
- 5 The Council will prepare a panel of candidates and offer engagement as and when vacancy/need arises.
- 6 The eligibility of the candidate will be determined as on the date of interview.
- 7 The competent authority reserves the right to postpone/cancel the recruitment exercise at any stage.

- 8 The selected candidates will have no claim for appointment on regular basis by virtue of being appointed on contractual basis.
- 9 The contract can be terminated without any notice by the competent authority, if at any time the conduct, performance and activities of the individual are found detrimental to the interests of the Council.
- 10 The selected candidates will have to sign a non-disclosure undertaking.
- 11 In case of large number of candidates reporting for interview/test, the competent authority reserves the right to shortlist the candidates by adopting appropriate criteria. Further, the interview may also be held on the next day.
- 12 The interested candidates may also in their own interest ensure that they fulfill the eligibility conditions. Ineligible candidates will not be allowed to appear for interview. Verification of documents/certificates will be done before the interview.
- 13 The candidates are requested to see Council's website (<u>www.ccrhindia.nic.in</u>) on regular basis for any new announcement in this regard.
- 14 No TA/DA will be paid for attending the interview.
- 15 Canvassing, in any form, will lead to disqualification of the candidate.

No advance application is to be sent. Applications will be collected at the venue of the written test/interview. \land

Research Officer (H)/S-4

CENTRAL COUNCIL FOR RESEARCH IN HOMOEOPATHY, NEW DELHI

| APPLICATION | N FO | R THE POS | T OF | | | ••••• | •••••• | ••••• |
|---|---------|-----------------------------|--------------------|-----------|---|-------|---|-------|
| 1. Name of the applicant in full : (in Block letters) | | | | | | | Affix one attested passpor size coloured | |
| 2. Father's/Husband's name : | | | | | | | | ph |
| 3. Religion and Caste (Attach attested copy of Caste Certificate in case of SC/ST/OBC in the prescribed format issued by the competent authority) | | | | 4: | | | | |
| 4. Address in Blo | ock le | etters with PIN | N code | : | | | | |
| a) Permanent | | | | : | | | | |
| b) Corres | pond | ence | | : | | | | |
| c) E-mail | Id | | | : | | | | |
| d) Mobile | e/land | line phone n | 0. | : | | | | |
| 5. Date of Birth a | and ag | ge | | : | | | | |
| 6. Educational qu | ıalific | eations (Attac | h attested | copies of | relevant docu | ments |) | |
| Qualifications Year of passing | | sing | Awarding authority | | Year of completion of internship training | | | |
| | | | | | | | | |
| 7. Experience, if | any (| Attach atteste | d copies o | f relevan | t documents) | | | |
| Experience Per | | Period in year Dura From | | | | | Area/Subject of Research / Teaching | |
| | | | | | | | | |
| | | | | | | | | |

8. Particulars of registration, if applicable

| Registration no. Date registra | | Authority registration | | Status of renewal of registration | |
|--------------------------------|--|------------------------|--|-----------------------------------|--|
|--------------------------------|--|------------------------|--|-----------------------------------|--|

- 9. In case of physically handicapped person Candidate must attaché attested copy of Certificate issued by Medical Board constituted by Central/State Govt.:
- 10. Particulars of publications in the reputed Journals, Magazines, etc. if any:

11. Other information, if any

12. Position in GATE/NET

13. List of enclosures

I declare that the information and particulars furnished by me, as above are true, complete and correct to the best of my knowledge and belief and nothing has been concealed or suppressed. I also fully understand that if any of the information is found incomplete/incorrect, false or misleading, my candidature is liable to be cancelled at any stage before appointment and if appointed, my appointment is liable to be terminated without notice or compensation in lieu thereof. I also understand that my candidature will be considered subject to criteria/conditions stipulated in the advertisement.

Dated:

Place:

Signature of Applicant

Note: Every page of the application, alongwith enclosures, should be continuously page numbered and also self attested by the candidate.

CENTRAL COUNCIL FOR RESEARCH IN HOMOEOPATHY, NEW DELHI

APPLICATION FOR THE POST OF Affix one 1. Name of the applicant in full attested passport (in Block letters) size coloured photograph 2. Father's/Husband's name 3. Whether SC/ST/OBC/PH/Gen. 4. Address Date:..... Registration No..... Signature of the candidate Signature of Rep. of C.C.R.H. CENTRAL COUNCIL FOR RESEARCH IN HOMOEOPATHY, NEW DELHI APPLICATION FOR THE POST OF Affix one 1. Name of the applicant in full attested passport (in Block letters) size coloured photograph 2. Father's/Husband's name 3. Whether SC/ST/OBC/PH/Gen. 4. Address

Signature of the candidate

Registration No.....

Date:....

Signature of Rep. of C.C.R.H.