## NATIONAL INSTITUTE FOR EMPOWERMENT OF PERSONS WITH MULTIPLE DISABILITIES (NIEPMD)



(Dept. of Empowerment of Persons with Disabilities (Divyangjan), MSJ & E, Govt. of India)

ECR, Muttukadu, Kovalam Post, Chennai 603 112, Tamil Nadu

Fax: 044-27472389 Tel: 044-27472104, 27472113&27472046, 27472104, 27472423, Toll Free No: 18004250345 Website: www.niepmd.tn.nic.in E-mail: niepmd@gmail.com

### **Employment Notice No.09/2017**

NIEPMD invites applications from Indian Nationals who fulfill the prescribed qualification, experience, age and other conditions for filling up the following non-sanctioned positions purely on contractual basis.

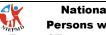
The engagement of faculty on contractual basis will be initially of a period of 01 (one) year, performance reviewed on every semester basis and the period of engagement on contract basis restricted to a maximum period of 02 (two) years.

The engagement of faculty on contract is based on the conduct / renewal / recognition of the HRD programme (Occupational Therapy) and depending upon the other academic activities of the Institute.

S /No.	Name of the Post	No. of Post	Consolidated pay (per month) ( no other allowance, perks or incentives are admissible)	Upper Age Limit as on last date of receipt of applications	Essential Qualifications & Experience required/Upper age limit
1.	Lecturer in (Occupational Therapy) (on contractual basis)	01 (One) (on contrac tual basis)	Rs.36,000/- per month (Rupees Thirty Six thousand only).  (Consolidated Pay - No other allowance, perks and incentives are admissible.)	Not exceeding 45 years.	Essential Qualification(s):-  (a) Master in Occupational Therapy with 55% with specialization in Paediatrics/ neurology/ psychiatry/ developmental disability/ rehabilitation from a recognized Institute in the specialization of Minimum 3 years of experience in teaching/research in the field of rehabilitation.

#### Other requirements:-

- 1. The applicant must be a citizen of India.
- Application form as per the prescribed format given below duly supported with self-attested photocopies of certificates of
  educational qualification & experience shall be submitted addressed to "The Director, NIEPMD", at the address given
  above. THE LAST DATE FOR RECEIPT OF APPLICATION WITH NECESSARY SUPPORTING
  DOCUMENTS is 29/09/2017. Applications received late will not be considered.
- 3. Separate application with prescribed fee should be submitted for each post. The envelope containing the application should be super scribed as "Application for the post of "<u>Lecturer in OT</u>" (on contractual basis) and sent to Director, NIEPMD in the above address by Speed / Registered post /Courier etc.
- 4. The Management reserves the right to call only those candidates who according to its decision rank high in term of eligibility criteria among the applications received and mere possessing the EQ / DQ and experience will not entail any candidate a right to be considered eligible for the post. The final list of candidates called for the comprehensive walk-in selection process is based on short-listing of candidates by the duly constituted committee(s).
- 5. The management reserves the right to reject any application without assigning any reason. It also reserves the right restrict the number of applicants for selection process upon the level of response for each post. The management reserves the right not to fill up the posts or any of the advertised posts. It reserves the right to offer lower position to the candidate(s) depending upon nature of experience possessed by the candidate. It also reserves the right to reject any applicant, cancel the part or candidature without any assigning any reason(s) thereof.
- 6. The Competent Authority/the duly constituted committee for this purpose can consider the candidature of such applicants who are in possession of lesser experience prescribed for, if otherwise in possession of essential qualification, as prescribed for. The consolidated pay of such candidate(s) will be fixed in the appropriate level. As such, candidates with lesser experience shall also apply for the positions notified.
- 7. The Competent Authority/duly constituted committee shall recommend fixing of appropriate consolidated pay in commensurate with the lesser experience/for those shortlisted candidate(s) whose performance in the screening process is found not upto the level fixed etc.
- 8. The decision of the Director, NIEPMD will be final and binding in all aspects.
- 9. Bringing in any type of Political/Official interference, influence, canvassing, other pressures in any form etc., will render disqualification of the candidature and action as deemed fit will be taken against such candidate. No correspondence in this matter is entertained. Any interim correspondence will not be entertained and replied to.



### National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)



(Dept. of Empowerment of Persons with Disabilities (Divyangjan).

MSJ & E, Govt of India)

East Coast Road, Muttukadu, Kovalam (Post), Chennai - 603 112. Telefax: 044-27472389 Ph: 044-27472113, 27472046, 27472104, 27472423, Toll Free No: 18004250345

E-mail: niepmd@gmail.com Website: www.niepmd.tn.nic.in

### **Employment Notice No. 09/2017**

NIEPMD invites applications from the Indian Nationals, who fulfill the prescribed Qualification, experience, age and other conditions for filling up the contractual post for conduct of Occupational Therapy course (Lecturer in Occupational Therapy).

For details of contractual posts required; Qualification; Consolidated Pay and other details and format of application visit <a href="www.niepmd.tn.nic.in">www.niepmd.tn.nic.in</a>.

The last date for receipt of filled in Application with necessary documents is 29/09/17

DIRECTOR NIEPMD

# NATIONAL INSTITUTE FOR EMPOWERMENT OF PERSONS WITH MULTIPLE DISABILITIES (NIEPMD)



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Fax: 044-27472389 Tel: 044-27472104, 27472113&27472046 Website: <a href="mailto:www.niepmd.tn.nic.in">www.niepmd.tn.nic.in</a> E-mail: <a href="mailto:niepmd@gmail.com">niepmd@gmail.com</a>

Recent Passport size Photograph

(5 cm X 4.5 cm) to be affixed& attested

### **APPLICATION FORMAT**

**Application for the post of :** Lecturer in Occupational Therapy (on contractual basis)

		\
1.	NIEPMD Advt No	Advt. No. 09/2017
2.	Name in Full (Capital Letters) (as in Matric/Degree Certificate)	
3.	Date of Birth	Day Month Year Age
	(enclose copy of matriccertificate)	
		Citizen of IndiaBy BirthBy Do micile
4.	Citizenship Status	
5.	Member of Scheduled Caste (SC) / Tribe (ST)	Write SC or ST or OBC (Attach certificate)
	/ Other Backward Class (OBC) / Person with Disability (PwD) etc.,(to enclose proof)	Indicate if Ex-Serviceman (ES) or
		Person with Disability (PWD)
6.	Address for Communication	
7.	Permanent residential Address	
8.	Name of Father / Husband	

9.	Details of Education starting from Matric (SSLC/X Std.,) onwards :- (to give details only on
	passed courses &where Degree/Certificates etc., are already awarded/issued):

Academic Qualification	Discipline	University /Inst/Board	Year & Month of Entry	Year & Month Pass	Full Time/Part Time/Correspondence	% of Marks

10. Additional Qualification / Certificate Courses if any (Training, Apprentice programs attended, refresher courses completed etc.)

Course	Duration	Certificate/ Organization	Whether Govt authorized/recognized	Class/Mark/details

11. Experience in chronological order upto the present post: (Attach a separate sheet if required)

Name of Organization/	Designation/ Post held	state whether on Regular Basis or on Deputation or on Contract Basis etc.,)	Salary drawn (Pay band + G.P to be mentioned in case of Govt. organization) Or consolidated pay	From	То	Nature of Work presently dealing with(attach proof/experience certificate	Total period of Exp in year & months

12. Innovative, Developmental works undertaken & significant achievements: (Enclose supporting documents)

S.No	Particulars	Number
1	Patent	
2	Publication of Books	
3	Publication of articles in Indian Journals	
4	Publication of articles in International Journals	
5	Projects	
6	Paper Presentations in Seminar/Conference/Workshop	
7	Membership of Professional Bodies/Universities	

13. Why you think you are suitable for the post you have applied for (Details within one page):

S.No	Names, Designation and Address	Phone No & Mail ID
1		
2		
3.		
nv othe	relevant information the applicant	want to mention, if any (attach additional
essary):	• •	, , , , , , , , , , , , , , , , , , , ,
	DECLARATION O	F THE APPLICANT
I here	by declare that the information give	en above is correct to the best of my kno
		d at a later date that any information giver
		satisfy the eligibility criteria, my candid
intment	is liable to be cancelled / terminated	d.
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