



**Addiction Treatment Facility (ATF)
Department of Psychiatry, AIIMS Nagpur**



F.No. AIIMS/NGP/PSY/ATF/2024-25/03

Date: 15/10/2024

The Department of Psychiatry, AIIMS Nagpur initiating Addiction Treatment Facility (ATF) under the guidance of National Drug Dependence Treatment Centre (NDDTC), AIIMS, New Delhi. Applications are invited from eligible candidates for the following posts to be filled purely on a contractual basis for the Addiction Treatment Facility (ATF) at AIIMS Nagpur. **The last date of receiving the application is 23rd October, 2024 (07 days from the date of publication)**

Sr. No.	Institute Type	Place of Posting	Post Name	No. of Post	Qualification	Age (Upper Age Limit)	Salary/ Month
01	Addiction Treatment Facility	AIIMS Nagpur	Data Manager	01	Graduate (Preferable: Qualifications/ experience in computer application)	38 for Open category and 45 for Reserved Category	Rs.18,000

Note:

1. The number of posts and/or reservations may change.
2. These posts are purely contractual and not the State or Central Government's regular posts. The appointed candidate cannot claim for regularization on a regular post.
3. Remuneration is a consolidated pay.
4. Preference will be given to those who have work experience and higher qualification.
5. Only short-listed candidates will be eligible for further selection procedures. Director AIIMS Nagpur reserves the right to adopt a suitable selection procedure. Reserves all the right to modify, add or delete any of the conditions and reserves the right to cancel the process of recruitment at any point in time
6. The appointment of the selected candidate will be for 11 Months which may be extended if performance is satisfactory, subject to continuation of the project/ programme. If the project/ programme is not extended; the contract will be terminated without any notice and the candidate cannot claim any right on the post or posting or cannot file any litigation regarding employment protection.
7. Age criteria for application is as mentioned in advertisement.
8. All required qualifications must be from a Government recognized & UGC approved university.
9. Candidate should possess required minimum educational qualification on the last date of the receipt of applications. Minimum & maximum age will be as on last date of receipt of applications.
10. Experience acquired after passing the minimum education qualification required for a particular post will only be considered. An experience not relevant to the post will be ignored.
11. The experience will be relaxed if sufficient candidates are not available.

12. The candidate is required to fill up and submit the Small Family Declaration Form at the time of the interview/appointment. In case it is found that the candidate is not fulfilling this norm, his candidature/appointment will be cancelled immediately.
13. If a candidate wishes to apply for more than one post, he/she should apply separately for each post.
14. Interested candidates fulfilling the above-mentioned criteria should submit their application in the given format only along with the attached self-attested copies of all the educational qualifications/experiences, School leaving certificate (Age), Age proof etc.
15. The Candidates who want to apply, should submit the physical copy to The Executive Director, AIIMS Nagpur, Plot No. 2, Sector - 20, MIHAN, Nagpur, Maharashtra, Pin: 441108. The soft copy of the application and supporting document as a single PDF document must also be mailed to atf@aiimsnagpur.edu.in before the last date of application.
16. Candidates are advised to visit <http://www.aiimsnagpur.edu.in> for regular updates & keep their e-mail ID and mobile number active for future correspondence/ notice/ instruction.

For any query please contact to:

□ **AIIMS Nagpur – 0712-2352033**

17. Last date of receipt of application will be 23rd October, 2024 till 05:00 pm. Applications received after the last date will not be considered.

If at all it is found that the candidate has submitted wrong information then his/her candidature will be cancelled automatically. The incomplete application & application on plain paper will not be considered.



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Department of Psychiatry, AIIMS Nagpur**



APPLICATION FORM

Photo

(All fields in the forms are mandatory to be filled. An incomplete form submitted will be treated as rejected.)

Exact Name of Position applied for:		
Name:		
Father's/Husband's Name:		
Date of Birth (DD/MM/YYYY):	Blood Group:	Gender:
Marital Status:	Nationality	Category:

Address/Contact Details: (Name of the District and Pin code is compulsory)

Address (Present/Correspondence):	
E-mail Id for correspondence:	Mobile No.

Languages Known (Write "Y"/ "N")	English	Hindi	Marathi	Others (Please specify below)

Academic/Professional Education Summary: (Starting from most recent)

From	To	Degree/Diploma	University/ Institute	Specialization/Subjects	Final Year Total Marks & Obtained Marks	Final Year Percentage

From	To	Degree/Diploma	University/ Institute	Specialization/Subjects	Final Year Total Marks & Obtained Marks	Final Year Percentage

Computer Knowledge:

MS-CIT Certification	Yes	No

Work/Experience Summary: (Starting from current/most recent)

Sr. No.	From (MM/YY)	To (MM/YY)	Organization	Designation	Role and Responsibilities
Total Experience (In Years and Months):					

Declaration:

I hereby declare that all statement made in the application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found untrue/ false/ incorrect or I do not satisfy the eligibility criteria my candidature will be cancelled, without assigning any reason thereof. I have read the content of the advertisement and agree to abide by the rules, regulations and procedures for appointment to the post applied for.

Name :-

Place:-

Date:-

Signature:-

महाराष्ट्र नागरी सेवा (लहान कुटुंबाचे प्रतिज्ञापत्र) नियम, २००५ नुसार
अर्जासोबत जोडावयाच्या लहान कुटुंबाच्या प्रतिज्ञापनाचा नमुना
प्रतिज्ञापन
नमुना - अ
(नियम ४ पहा)

मी श्री./श्रीमती/कुमारी -----
श्री. ----- यांचा / यांची मुलगा / मुलगी
/पत्नी, वय ----- वर्ष, राहणार -----

याद्वारे पुढीलप्रमाणे असे जाहीर करतो / करते की,

- (१) मी ----- या पदासाठी
माझा अर्ज दाखल केलेला आहे.
- (२) आज रोजी मला ----- (संख्या) इतकी हयात मुले आहेत. त्यापैकी दिनांक
: २८ मार्च, २००५ नंतर जन्माला आलेल्या मुलांची संख्या -----
आहे. (असल्यास, जन्मदिनांक नमूद करावा.)
- (३) हयात असलेली मुलांची संख्या दोनपेक्षा अधिक असेल तर दिनांक : २८ मार्च, २००५
व तदनंतर जन्माला आलेल्या मुलामुळे या पदासाठी मी अनर्ह ठरविण्यास पात्र होईन
याची मला जाणीव आहे.

(उमेदवाराची स्वाक्षरी)

ठिकाण :

दिनांक : / /