



Advt. No.A.12025/1/2013-Admn.II
NATIONAL INSTITUTE OF HEALTH AND FAMILY WELFARE
Baba Gang Nath Marg, Munirka, New Delhi - 110067

VACANCY NOTICE

This autonomous Institute, funded by Ministry of Health and Family Welfare, is an apex technical Institute for promoting Health and Family Welfare Programmes in the country through Education and Training, Research and Evaluation, Consultancy, Advisory and specialized services:

Applications are invited for the following posts on regular basis:

Sl. No.	Name of the post and Pay structure.	No. of posts	Age	Reservation	Educational and other qualifications.
1.	Staff Nurse Rs.9300-34800+ GP Rs.4200 (PB-2).	02	18-25 years	1 – UR 1 – OBC	Essential: i. Diploma in General Nursing and Midwifery. ii. Should be registered as 'A' Grade Nurse with a State Nursing Council. Desirable: i. B.Sc. Nursing from a recognized University or equivalent.
2.	Technical Assistant Production (Publication) Rs.5200-20200+GP Rs.2800 (PB-1).	01	18-25 years	1 – UR	Essential: i. Higher Secondary or equivalent from a recognized board. ii. Certificate of Training in Printing from a recognized board. iii. 3 years' experience in preparation of dummy, layouts of publication and proficiency in different stages involved in printing of publications. iv. Good Knowledge of Hindi and English. Desirable: i. Training or Diploma in Journalism. ii. Experience in offset printing press.
3.	Lower Division Clerk Rs.5200-20200+GP Rs.1900 (PB-1).	03	18-25 years	2 – SC 1 – ST	Essential: i. Matriculation or its equivalent from a recognized board. ii. Typing speed of 30 w.p.m.

GENERAL:

1. **The crucial date for determining age will be 31.07.2013.** Age relaxation for direct recruitment to the candidates belonging to SC/ST/OBC/Physically Handicapped and Ex-Servicemen etc. shall be in accordance with the rules, orders and notifications issued from time to time by the Government of India.
2. The Candidates working in Govt./Semi Govt. Organizations must apply through proper channel.
3. Mere fulfilling the essential qualifications does not entitle a candidate to be called for interview.
4. Late applications/incomplete applications/interim enquiries will not be entertained.
5. Canvassing in any form by or on behalf of any candidate will disqualify the candidate.
6. No correspondence will be entertained from the applicant either before or after the selection. The decision of the Institute would be final.
7. NIHFWS reserves the right to either fill up all the posts, or some of the posts or non of them without assigning any reason.
8. The Institute at its discretion may conduct interview/written test/skill test for all/any of the above posts to select the candidates on the basis of merit. The decision of the Director, NIHFWS shall be final in this regard.
9. In routine job the employees are required to work/carry out day to day job on Computers therefore, preference will be given to candidates having operational knowledge of Computer.
10. NIHFWS will not be responsible for any postal delay/loss in transit in submission of application within specified time. Application forwarded through any other means including by FAX or e-mail will not be entertained.
11. The candidates appointed will be governed by new Contributory Pension Scheme effective from 01.01.2004.

HOW TO APPLY:

1. **Interested and eligible candidates may apply for the posts in prescribed application form (Annexure).** The application must be accompanied by the prescribed fee of **Rs.200/- (Rupees two hundred only)** by a crossed Indian Postal Order/Demand Draft in favour of Director, National Institute of Health and Family Welfare, New Delhi **payable at New Delhi.**
2. **No fee for Scheduled Caste, Scheduled Tribe, Physically Handicapped, female candidates and Departmental candidates.** Fee once paid will not be re-funded in any case.
3. Complete applications along-with duly attested copies of educational qualifications, proof of belonging to SC/ST/OBC/Physical Handicapped and experience certificates should reach **Deputy Director (Admn.), National Institute of Health and Family Welfare, Baba Gang Nath Marg, Munirka, New Delhi – 110067 on or before 26.08.2013.** Alternatively, the application may be dropped in the drop box kept at the Main Gate of the Institute. The envelope should be superscribed as "Application for the post of _____"
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Director

**NATIONAL INSTITUTE OF HEALTH AND FAMILY WELFARE
Baba Gang Nath Marg, Munirka, New Delhi - 110067**

FORM OF APPLICATION

<p>APPLICATION SHOULD BE ACCOMPANIED BY A CROSSED INDIAN POSTAL ORDER/DEMAND DRAFT OF Rs.200/- (RUPEES TWO HUNDRED) PAYABLE AT NEW DELHI AS APPLICATION FEE. NO FEE FOR SC/ST/PH/FEMALE CANDIDATE/DEPARTMENTAL CANDIDATES.</p> <p>Give details of the Indian Postal Order/Demand Draft below: 1. Name of the Post Office/Bank _____ 2. No. and Date _____ 3. Amount _____</p>	<p>ATTACH A RECENT PHOTOGRAPH</p>
<p>Note: 1. Application should be sent only in the prescribed format supported by attested copies of testimonials. 2. Fill up all the columns except those, which are not applicable.</p>	

1. (a) Post applied for: _____
(b) Date of advertisement: _____ (c) Item No. _____
2. Name in full _____
(In Block Letters) First Middle Last
3. Father's/Husband's Name: _____
(In Block Letters)
4. (a) Date of Birth (in figure): _____
(b) Age as on 31.07.2013 : _____ Years _____ Months _____ days
(c) Whether claim for age relaxation: (Yes/No): _____
5. (a) Social Category: _____
(SC/ST/OBC/PH/GEN/Ex-Serviceman) (Please attach attested photocopy of the certificate)
(b) (i) If physical Handicapped (Nature of Disability) (VH/OH/HH): _____
(ii) Whether Ex-serviceman: _____ Date of Retirement _____
(Please attach attested photocopy of the certificate)
6. Gender (Male/Female) : _____
7. Marital Status: Married/Unmarried/Divorcee etc. (Strike out whichever is not applicable)
8. (a) Telephone No.(with STD Code): _____ (b) Mobile No. _____
(c) Email ID: _____.
9. Nationality : _____
10. Religion : _____

11. Address for Correspondence: _____

Pin Code: _____

12. Permanent Address: _____

Pin Code: _____

13. Particulars of all examination passed and degree and technical qualifications obtained commencing from School Board or equivalent examination:
(Please attach separate sheet, if required)

Examination/Degree	University/Board	Year of Passing	% age of marks / Division	Subjects

14. Experience: (Please attach attested copies of the experience certificate) (please start with the latest).
(Please attach separate sheet, if required).

Name of employer	Post held	Period		Pay Scale/Pay Band & Grade Pay with Basic Pay	Nature of work / duties
		From	To		

15. Name of the employment exchange and registration no. if any: _____

16. Typing Speed, where applicable: English _____ w.p.m. Hindi _____ w.p.m.

17. Working knowledge of computer: (Yes/No): _____

18. Are you applying through proper channel: (Yes/No) : _____

If 'yes' is this your advance copy ? (Yes/No): _____

DECLARATION

I hereby declare that I am a citizen of India and all the statements made in this application are true, complete and correct to the best of my knowledge and belief. I have never been convicted by any court of law and no criminal case is pending against me in any court of law in the country. My certificates can be got verified at any time from the issuing authority. In the event of any information being found false/incorrect or ineligibility being detected before or after the written test/skill test, my candidature will stand automatically cancelled.

Place:

(Signature of the candidate)

Date:

Name: _____

Certificate by Head of Department/Organization

(Applicable only to those candidates who are working in Govt./Semi. Govt./PSU/Autonomous Bodies and who are required to apply through proper channel).

1. Certified that Shri/Smt./Km. _____ is an employee of this deptt/office/organization. I have no objection to his/her application being considered for the post.
2. Certified that particulars of the officer/employee have been verified and found to be correct.
3. It is certified that no disciplinary proceedings are either pending and/or contemplated against the officer/employee. Integrity of the officer/employee is also certified.
4. Certified also that he/she submitted his/her application to the department/ office /institute /organization on _____ for onward transmission to the NIHFWS.

Date:

Signature of Head of Department
(with stamp)

Place:

Designation _____
(Ministry/Office stamp)