



# केन्द्रीय यूनानी चिकित्सा अनुसंधान संस्थान

طب يونانى كا مركزى تحقيقى اداره

## CENTRAL RESEARCH INSTITUTE OF UNANI MEDICINE

{Under Central Council for Research in Unani Medicine, New Delhi, Ministry of Ayurveda, Yoga and Naturopathy, Unani, Siddha, Sowa-Rigpa & Homoeopathy (AYUSH)}  
Vill. & Post-Basaha, Kursi Road, Lucknow-226 026(U.P.)

### Advertisement No.3/2015-16

Application on prescribed form are invited for engagement on the following post on purely contractual basis for National Programme for Prevention Control of Cancer, Diabetes, Cardio Vascular Disease and Stroke(NPCDCS) in Lakheempur Kheri, Uttar Pradesh. Application may be submitted at the office of the Deputy Director, Central Research Institute of Unani Medicine, Vill. & Post- Basaha, Kursi Road, Lucknow-226026.

01.	Name of the Post	<b>Yoga Instructor/Therapist</b>
02.	No. of Post	17(One each at CHC)
03.	Consolidated remuneration	Rs. 27000/-p.m.
04.	Age	Upto 35 years
05.	Place of posting	01 each at 17 Community Health Centres, District Lakheempur Kheri(U.P.)
06.	Educational and other qualifications	<b>Essential:</b> (1) A full time Regular Degree in Yoga/M.A.(Yoga)/M.Sc.(Yoga) from a recognised University. (2) Experience - Nil. <b>Desirable:</b> Working experience in Hospital/ Nursing Homes etc.  <b>OR</b> <b>Essential:</b> (1) Any Degree with full time regular and one year Diploma in Yoga(after degree) from a recognised University or an Institute of repute. (2) One year professional experience.  <b>Desirable:</b> Working experience in well established/reputed Yoga Therapy Centre/Hospital.
07.	Tenure of Engagement	One year

Application form may be downloaded from the website of the Council([www.ccrum.net](http://www.ccrum.net)).

The Council may evolve its own criteria to shortlist the candidates for interview. This may also include an objective type screening test if considered necessary. The Council reserve the right to restrict the number of candidates to be called for interview.

Last date for receipt of the application(s) at Office of the Deputy Director, Central Research Institute of Unani Medicine, Lucknow is 16-01-2016.

Application received late will not be entertained.

Date of interview/time & venue will be intimated through email/mobile phone only.

**Deputy Director**

# **CENTRAL RESEARCH INSTITUTE OF UNANI MEDICINE**

*(Central Council for Research in Unani Medicine, New Delhi)*

**(Ministry of AYUSH)**

Basaha, Kursi Road, Lucknow – 226026 (UP)

## **APPLICATION FOR THE POST OF:**

1. Candidate's Name in full  
(IN BLOCK LETTERS) \_\_\_\_\_
2. Father's Name in full \_\_\_\_\_
3. Address  
(i) Postal address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
(ii) Permanent address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
(iii) E-mail address \_\_\_\_\_  
(iv) Telephone/Mobile No. \_\_\_\_\_
4. a) Date of birth \_\_\_\_\_

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(Based on Matriculation or school Leaving Certificate. An attested copy of the certificate must be attached)

- b) Age as on the last date of receipt of application

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5. Place of Birth and State in which it is situated \_\_\_\_\_
6. Nationality \_\_\_\_\_  
State either by the birth or by Domicile \_\_\_\_\_
7. Caste \_\_\_\_\_ State whether SC/ST/OBC \_\_\_\_\_

(An attested copy of the Certificate must be attached)

8. a) Father's nationality \_\_\_\_\_  
b) Profession \_\_\_\_\_  
c) Name of the State to which the Candidate's father belong or belonged \_\_\_\_\_
9. a) Candidate's mother tongue \_\_\_\_\_  
b) Other Indian and foreign language, if any, he/she can speak, read and write fluently. Give full particulars and state the examination passed. If any, in each.

Read Only	Speak only	Read & speak	Read, write & speak	Examinations passed

10. Examination passed:

Examination passed	Name of the School/College	University or Board	Year	%age of marks	Subjects	Distinction

11. Appointment so far held:

S. No.	Name of the post with full address of the employers	Date of joining	Date of leaving	Nature of duties performed during the service	Scale of pay and basis pay drawn	Reason for leaving

12. If candidate has been outside India, the following particulars should be given:

Country visited	Date of visit	Duration of visit	Purpose of visit

13. Any other work relevant to the qualifications for the post applied for done since leaving colleges with dates

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14. a) Are you free from debt?

(Answer 'yes' or 'no')

- a) If you are under liability to reply  
Money advanced by any purpose,  
State the particulars:

- b) If the answer to (a) is 'No'  
Answer (b) clearly:

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15. Name, addresses and professions of two referees, who should be responsible persons, not related to the candidate but well acquainted with him in private life, and not connected with his school or college.

S. No.	Name of referees	Address	Period for which he was known to the candidate
1.			
2.			

16. Details of enclosures:

- |    |     |
|----|-----|
| 1. | 2.  |
| 3. | 4.  |
| 5. | 6.  |
| 7. | 8.  |
| 9. | 10. |

17. Additional information if any:

## **DECLARATION**

I declare that all statement recorded in the application form are true to the best of my knowledge and belief.

Signature of the Candidate in full \_\_\_\_\_

Present address for correspondence \_\_\_\_\_

Place:

Date: \_\_\_\_\_

If employed, remarks of the forwarding authority:

Signature

Name

Designation

Place :

Date : \_\_\_\_\_

**Note : Application not signed by the candidate is liable to rejection.**