

**APPLICATION FORM FOR THE POST OF DIRECTOR GENERAL,
CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE (CCRUM),
NEW DELHI**

Name of the post applied for

1. Name of the candidate :
(in block letters)
2. Father/Husband 's Name :
3. Address(in block letters)
 - a) Permanent :
 - b) Correspondence :
 - c) Email I.D :
 - d) Mobile & Landline Phone No. :
4. Date of birth (in Christian era) :
5. Age as on last date for submission of Application
6. Retirement age in the present Department:
7. Date of retirement in the Department:
8. Educational qualifications:-
 - a) General

| Qualification | Awarding Authority | Year of Passing | No. of attempts |
|---------------|--------------------|-----------------|-----------------|
| | | | |

b) Technical

| Qualification | Awarding Authority | Year of Passing | Whether recognized by C.C.I.M. or any other authority |
|---------------|--------------------|-----------------|---|
| | | | |

9. Experience
- | | | |
|--|-----------|----------------------|
| | Period | Name of Organization |
| | From - To | Total (in year) |

- a) Professional -
- b) Teaching * -
 - i) Under graduate level
 - ii) Post graduate level
- c) Research -
- d) Administrative -

*as Associate Professor/Reader/HOD of specialty in Unani Medicines.

10. Prescribed criteria and qualifications/experience possessed by the candidate

| | | Qualifications/experience required | Qualification/experience possessed by the officer |
|-----------|-----|------------------------------------|---|
| Essential | (1) | | |
| | (2) | | |
| | (3) | | |
| Desirable | (1) | | |
| | (2) | | |
| | (3) | | |

Note: (if any qualification has been treated as equivalent to the one prescribed in the rules, state the authority for the same)

11. Particulars of Registration:

| Registration No. | Date of Registration | Authority giving Registration | Status of Renewal of Registration | Whether registered with CCIM or any other authority |
|------------------|----------------------|-------------------------------|-----------------------------------|---|
| | | | | |

12. Details of the employment in chronological order, post wise (enclose separate sheet showing status of the post etc., duly signed)

| Office/Institution/ Organization | Post held | From | To | **Pay Band (Rs.15,600-39,100/- + Grade Pay Rs.7,600/- or Rs.37,400 - 67,000/- + Grade Pay Rs.8,700/-) | Nature of duties of posts held. |
|-------------------------------------|-----------|------|----|---|---------------------------------|
| | | | | | |

****Note** – If working under the State Government or any other authority which has not implemented the 6th CPC Scales, on the lines of Central Government, please enclose a certificate from the Competent Government authority that the Pay Scale drawn by him/her is equivalent to/ correspond to the Pay Scales in the Grade Pay of Rs.8,700/ Rs.7,600/- as the case may be.

13. Nature of present employment i.e., whether ad-hoc or temporary or quasi-permanent or permanent.

14. In case the present employment is held on deputation/contract basis please state:

- Date of initial appointment
- Period of appointment, on deputation/contract
- Name of the parent office/organization to which the candidate belongs

- (6)
15. Additional details about present employment:
 - a) Whether working under – Central Government/Autonomous Organization/ Government Undertaking/State Government/Universities
 - b) Pay Band + Grade Pay/Scale of pay in the present post.
 - c) Total emoluments receiving per month:
 16. Please state whether the candidate is working in the same Department and are in the feeder grade or in the feeder to the feeder grade.
 17. Additional information, if any, which the candidate would like to mention in support of his/her suitability for the post. (Enclose a separate sheet, if the space is insufficient)
 18. Whether belongs to SC/ST/OBC/General.
 19. The candidate should enclose attested photocopies in support of his/her qualifications (general & technical) mark sheets of all the examinations conducted by Board/Council/University for the technical courses, Internship training, Registration Certificate, experience etc., in support of his/her claim.
 20. Research work as evidenced by publications.
 21. Remark

UNDERTAKING

Certified that the information given above is correct to the best of my knowledge.

Date:

Signature of candidate
Complete Postal Address of the
candidate
with PIN CODE

Countersigned by the Employer with Seal