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क्षेत्रीय यूनानी चिकित्सा अनुसंधान संस्थान, कोलकाता

Regional Research Institute of Unani Medicine, Kolkata

(CCRUM, Ministry of AYUSH, Govt. of India)

WALK-IN-INTERVIEW

Regional Research Institute of Unani Medicine, Kolkata proposes to engage the following staff on contractual basis for the SCSP Mobile Healthcare Programme:

Sl. no.	Details	Research Assistant (RA)	Senior Research Fellow (SRF)	Junior Research Fellow (JRF)
1.	Name of Post	RA / SRF / JRF (Unani)		
2.	No. of Post	01 (One)		
3.	Age	Not exceeding 40 years	Not exceeding 35 years	Not exceeding 35 years
4.	Tenure	Initially for 6 months on Contract basis & can be extended based on performance		
5.	Consolidated Pay	Rs.47,000/- plus HRA	Rs.35,000/- plus HRA	Rs.31,000/- plus HRA
6.	Place of Posting	Regional Research Institute of Unani Medicine, 250A/29, G. T. Road, Liluah, Howrah		
7.	Educational qualifications	1. Postgraduate Degree in Unani system of Medicine from a recognized statutory board/University included in the 2 nd schedule of IMCC act 1970 2. Enrolment on the Central Register or State register of AYUSH	1. Postgraduate Degree in Unani system of Medicine from a recognized statutory board/University included in the 2 nd schedule of CCIM act 1970. Or BUMS from a recognized Statutory Board/University included in the 2 nd schedule of the IMCC act 1970 with 2 (Two) years experience as Junior Research Fellow. 2. Enrolment on the Central Register or State register of AYUSH.	1. BUMS from a recognized Statutory Board/University included in the 2 nd schedule of the IMCC act 1970 2. Enrolment on the Central Register or State register of AYUSH.

Munshi

(Dr. Younis I. Munshi)

Deputy Director & Head,

RRIUM, Kolkata.

उपनिदेशक

क्षेत्रीय यूनानी चिकित्सा अनुसंधान संस्थान
पश्चिमी बंगाल, 250A/29, जी.टी.रोड (उत्तर)
लिहूआ, हुवरा-711204

General conditions :

1. The eligibility of the candidates will be determined as on the date of advertisement
2. The interview will be held **on 14-05-2022 at 10.00 AM** in the office premises of **Deputy Director, Regional Research Institute of Unani Medicine, 250A/29, G. T. Road, Liluah, Howrah-711204.**
3. The place of posting will be at Regional Research Institute of Unani Medicine, 250A/29, G. T. Road, Liluah, Howrah-711204.
4. The engagement shall be initially for a period of six months and may be extended by the competent authority based on performance.
5. Eligible applicants should come with the curriculum vitae in the prescribed format. Download application form from **ccrum.res.in** they should also bring original education/professional qualification certificate/experience certificate(s) along with a set of self attested Xerox copies and two recent passport size photographs.
6. Candidates already in service shall also bring a "No Objection Certificate" from their employer.
7. Candidates who fulfill the above requirements may report for interview **on 14-05-2022 at 10.00 AM** at office of **Deputy Director, Regional Research Institute of Unani Medicine, 250A/29, G. T. Road, Liluah, Howrah-711204.**
8. No TA/DA will be paid. The authority reserves the right to accept or reject the candidature without assigning reason thereof. Canvassing in any form will render the candidate disqualified
9. Interested candidates may also in their own interest, ensure that they fulfill the eligibility conditions. Ineligible candidates will not be allowed to appear for the interview. Verification of documents /certificates will be done before the interview.
10. The competent authority reserves the right to postpone/cancel the recruitment exercise at any stage.
11. The selected candidate shall have no claim for appointment on regular basis by virtue of their being engaged on contractual basis.
12. Candidates are requested to see Council website: **ccrum.res.in** on regular basis for any announcement in this regard.

Younis I. Munshi

(Dr. Younis I. Munshi)

**Deputy Director & Head,
RRIM, Kolkata.**

क्षेत्रीय युनानी चिकित्सा अनुसंधान संस्थान
पल्लो मंजिल, 250A/29, जी.टी.रोड (उत्तर)
लिलुआ, हावड़ा-711204

CENTRAL COUNCIL FOR RESEARCH IN UNANI MEDICINE

**61-65, Institutional Area, Opp-D Block, Janakpuri, Delhi-110058
(Ministry of AYUSH, Govt. of India)**



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 date of Advertisement

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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, each.

Read Only	Speak only	Read & speak	Read, write & speak	Examination 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

14. 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.			

15. Details of enclosures:

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

18. Additional information if any:

DECLARATION

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

Signature of the Candidate in full _____

Address for correspondence _____

Place:

Date:

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