



# भारतीय चिकित्सा केन्द्रीय परिषद्

आयुष मंत्रालय, भारत सरकार के अधीन एक सांविधिक निकाय  
कार्यालय: 61-65, संस्थानिक क्षेत्र, जनकपुरी, डी.ब्लॉक नई दिल्ली -110058

## CENTRAL COUNCIL OF INDIAN MEDICINE

A STATUTORY BODY UNDER THE MINISTRY OF AYUSH, GOVT. OF INDIA  
OFFICE: 61-65, INSTITUTIONAL AREA, JANAKPURI, D-BLOCK NEW DELHI-110058

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File No. 1-30/2020-Estt.(Part-I)JTA/STA

Date of advertisement:23.11.2020

### WALK IN INTERVIEW

The CCIM is a Statutory Body constituted under IMCC Act, 1970 (48 of 1970) to prescribe the Minimum Standards of Education in Indian Medicine and matter related thereto. A walk-in-interview will be held on 03.12.2020 in the office of Central Council of Indian Medicine to engage One (01) Senior Technical Associate/Junior Technical Associate (Unani) and online interview for the post of (1) Senior Technical Associate/Junior Technical Associate (Siddha) on purely contract basis as per details given below:-

| Sr No. | Name of the post & Numbers   | Qualification, experience and age limit   | Remuneration   | Date & time of the Interview |
|--------|--|---|--|------------------------------|
| 1.     | Senior Technical Associate/ Junior Technical Associate Unani (01) Post | <b>Essential for STA:-</b> <ul style="list-style-type: none"><li>Post Graduate qualification in Unani from a recognized University.</li></ul> <b>Essential for JTA:-</b> <ul style="list-style-type: none"><li>Under Graduate qualification in Unani from a recognized University. The candidates should be proficient in working independently on MS office and should be familiar with other computer related applications.</li></ul> | Rs. 35,000/- p.m. (consolidated) for PG<br><br>Rs. 30,000/- p.m. (consolidated) for UG | 03.12.2020 at 11.00AM        |

| Sr No. | Name of the post & Numbers   | Qualification, experience and age limit  | Remuneration   | Date & time of the Interview   |
|--------|--|--|--|--|
| 2.     | Senior Technical Associate/ Junior Technical Associate Siddha (01) Post. | <b>Essential for STA:-</b> <ul style="list-style-type: none"><li>Post Graduate qualification in Siddha from a recognized University.</li></ul> <b>Essential for JTA:-</b> <ul style="list-style-type: none"><li>Under Graduate qualification in Siddha from a recognized University. The candidates should be proficient in working independently on MS office and should be familiar with other computer related applications.</li><li>Note:- applications be sent on following email address latest by 02.P.M dated 02.12.2020.<br/>www.asadmin@ccimindia.org/os@ccimindia.org</li></ul> | Rs. 35,000/- p.m. (consolidated) for PG<br><br>Rs. 30,000/- p.m. (consolidated) for UG | 03.12.2020 at 12.00AM<br><br>Through video conferencing for Siddha JTA/STA |

**General Conditions:-**

1. The engagement of service of the candidate shall be purely on contract basis and initially for a period of six months which may be extended for further period on performance basis. The candidate will have no right to claim for regularization of his/her services under any circumstances.
2. **Applicant should come with the Bio-data in the prescribed format along with the original certificates, experience certificates etc. with a set of self attested photocopies and two passport size recent photographs in case of walk in interview for Unani.**
3. **In case of Siddha JTA/STA link of interview will be sent to those candidates email only, whose applications are received upto 02.00PM dated on 02.12.2020.**
4. The candidates selected for the post will be required to work in Central Council of Indian Medicine.
5. No TA/DA will be paid for attending the interview.
6. The prescribed format of bio-data can be downloaded from the website of CCIM i.e. [www.ccimindia.org](http://www.ccimindia.org)
7. The number of posts may be subject to change without any prior notice.
8. Council reserves the right to cancel/ postpone the interview without any prior notice/ without any reason.

**SECRETARY, CCIM**

**CENTRAL COUNCIL OF INDIAN MEDICINE**

**NEW DELHI**

Application for the Post of \_\_\_\_\_

Recent  
passport size  
photograph to be  
affixed in the

Name of applicant \_\_\_\_\_

(in block letters)

Father's/Husband's/Guardian's Name \_\_\_\_\_

Gender (Male/Female) \_\_\_\_\_

Date of Birth \_\_\_\_\_

Age as on 02.12.2020 \_\_\_\_\_

Details of registration with \_\_\_\_\_

Nationality \_\_\_\_\_

Category (OBC/SC/ST/GENERAL) \_\_\_\_\_

**Contact Details**

Postal Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Permanent Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone Number \_\_\_\_\_

E-mail \_\_\_\_\_

## ACADEMIC QUALIFICATION

### DETAILS OF U.G. QUALIFICATION

| <b>NOMECLATURE<br/>OF DEGREE (WITH<br/>ABBREVIATIONS</b> | <b>NAME OF THE<br/>COLLEGE</b> | <b>UNIVERSITY/<br/>AWARDING<br/>BODY</b> | <b>YEAR OF<br/>PASSING</b> | <b>AGGREGATE<br/>PERCENTAGE</b> |
|--|--------------------------------|--|----------------------------|---------------------------------|
|  |                                |  |                            |                                 |

**DETAILS OF P.G. QUALIFICATION**

| <b>NOMECLATURE OF DEGREE</b> | <b>NAME OF THE COLLEGE</b> | <b>UNIVERSITY/ AWARDDING BODY</b> | <b>YEAR OF PASSING</b> | <b>NAME OF THE SUBJECT</b> | <b>AGGREGATE PERCENTAGE</b> |
|------------------------------|----------------------------|-----------------------------------|------------------------|----------------------------|-----------------------------|
|                              |                            |                                   |                        |                            |                             |

**DETAILS OF EXPERIENCE**

| <b>NAME OF POST</b> | <b>PAY SCALE</b> | <b>NATURE OF EMPLOYMENT (GOVT. / PRIVATE)</b> | <b>NATURE OF DUTIES</b> | <b>DETAILS OF DURATION</b> |
|---------------------|------------------|---|-------------------------|----------------------------|
|                     |                  |   |                         |                            |

**DECLARATION**

I hereby certify that above information are true and no relevant information has been concealed.

Place : \_\_\_\_\_

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

**Signature of Applicant**

*Attested documents of qualification(s) and experience should be attached.*