

अखिल भारतीय आयुर्विज्ञान संस्थान, रायबरेली All India Institute of Medical Sciences, Raebareli

(An Autonomous Institute under the Ministry of Health and Family Welfare, Govt. of India)

Munshiganj, Raebareli - 229405, Uttar Pradesh, India

www.aiimsrbl.edu.in

Date: 16.09.2021

No. AIIMS/Rbl/Admin/RC/Contact/ICTC/2020-2021/4713

Notice

Offline applications are invited for below mentioned posts (Contract Basis) for ICTC at AIIMS, Raebareli. The interested qualified candidates as per the following criteria can submit their applications in prescribed format.

S. No	Post	Qualification	Remuneration
1.	ICTC Lab Technician (01)	Essential Qualification & Experience: Graduate in Medical Laboratory Technology (B.Sc.), with minimum 01 Year Experience after Graduate OR Diploma in Medical Laboratory Technology (DMLT); with minimum 02 year experience after diploma. The service of exiting LTs who do not have done a certificate Course in Medical Laboratory Technology and have more than 05 year experience of working in the ICTC/PPTCT/ART Centre run under the National AIDS Control Programme. Other expertise Required: 1. Working knowledge of computer.	Rs. 13000/-
2.	ICTC Counselor (01)	Essential Qualification & experience: Post Graduate degree /diploma in psychology/social work/sociology/anthropology/Human Development/ Nursing; with minimum 01 year experience after of counseling in health sector preferably in HIV/AIDS. OR Graduate in Psychology/ Social work/ sociology/ Anthropology/Human Development/Nursing with minimum 03 year working in field of counseling in health sector, preferably in HIV/AIDS. In the case of those recruited from the affected by HIV/AIDS, the experience will be relaxed to a minimum of 01year of experience in the field of HIV/AIDS. Other expertise required: 1. Working knowledge of computers	Rs. 13000/-

GENERAL INSTRUCTIONS FOR FILLING UP OF OFFLINE APPLICATION FORM.

- 1. Please read the following instructions carefully before filling up of offline application form for above mention posts.
- 2. Candidates are advised to fill up the form in the format provided.

- 3. Please note that all the columns of the application have to be compulsorily filled up. In case of nil information for a particular column, 'N/A' is to be written. The form is to be filled up by the candidate himself / herself in **Block Capitals** with blue/black ball point pen. The form is to be filled up neatly without any overwriting. Use of corrective fluid (whitener) is not permitted. Column wise instructions are as under:-
- a) NAME: Full name as written in Matriculation Certificate
- b) MOTHER'S NAME: Mother's name as written in Matriculation Certificate
- c) FATHER'S NAME: Father's name as written in Matriculation Certificate
- d) GENDER: Male / Female
- e) PRESENT ADDRESS WITH PIN CODE: Complete present address of the candidate with PIN code
- f) MOBILE NO
- g) E-mail
- h) DATE OF BIRTH: Date of Birth as per Matriculation Certificate in DD/MM/YYYY format.
- i) DECLARATION: The candidate should carefully read and understand the declaration before signing.
- j) SIGNATURE OF APPLICANT The candidate should sign in the space provided.
- k) PLACE & DATE Place and date to be filled up at the time of filling up of application form.
- 4. The application in the prescribed format (Annexure) should be sent to the following address by **register or speed post.**

To,

Recruitment Cell,

All India Institute of Medical Sciences,

Munshiganj, Raebareli (UP)-229405

- 5. The last date for receiving form is 30th September-2021 till 5:00 PM.
- 6. Only shortlisted candidates will be informed and called for the interview. The list of short listed candidates and date of the interview will be uploaded in the website. The candidates are advised the regularly visit the AIIMS, Raebareli website for information.
- 7. Based on this experience, the selected candidate cannot claim any permanent employment from AIIMS, Raebareli.

APPLICATION FORM

(Application for Appointment on Contract Basis)

1 D - 4 11 - 1 C -			,	
1. Post applied to	r:	•••••		
2. Applicant's Na	me:	Sex (M/F)		Affix Passport
3. Father's Name:	size photograph			
1 Date of Rirth:	Age			range ap
4. Date of Birtin	Age	• • • • • • • • • • • • • • • • • • • •		
5. Mailing Address	SS:			
		DDI		
		PIN		
6. Permanent Add	lress:			
		PIN		
7. Telephone No.	: Mobile No):		
8. E-mail ID:		•••••		
9 Educational T	echnical/Professional Qualifications	(High School ar	nd above): (Attac	h
Certificates)	Comment Troisesessing Quartifications	(Tingin Sensor un	iu use (e). (i iuus	••
Qualifications	Board/University/Institutions	Passing	Percentage	Subjects
		Year	of Marks	
10. Computer Sk	ill:-			
i). Working kı	Yes/No			
ii).Having kno	Yes/No			

11. Experience (From present to previous):(Attach proof of previous experience like appointment letter, experience certificate, salary certificates etc.)

Designation	Name of Institute/ Organization	Nature of Work	Working Duration		Name, designation and contract no. of	
			From	to	Reporting officer	

12. Any other information:	
<u>Declaration</u>	
I declare that the information given above is truand belief. Any information, if found false, will reject m	,
Date:	
Place:	Applicant's Signature