



ಅಖಿಲ ಭಾರತ ವಾಕ್ ಶ್ರವಣ ಸಂಸ್ಥೆ-೫೨೦೦೦೬
अखिलभारतीय वाक् श्रवणसंस्थान :मैसूरु - 570006

ALL INDIA INSTITUTE OF SPEECH & HEARING: MYSORE – 570006
An Autonomous body under the Ministry of Health and Family Welfare,
Govt. of India, Manasagangothri, Mysore – 570 006
Phone: 0821-2502000/ 2502100, www.aiishmysore.in

ವಿಜ್ಞಾನಸಂಖ್ಯಾ/ **ADVERTISEMENT No. 12/2023**

ದಿನಾಂಕ/**Dated: November 24, 2023**

AIISH, Mysore invites applications for the following post to be filled on contractual basis against the sanctioned posts as detailed below:

Post code	Name of the post	No. of Posts	Place of work
1	Lecturer in ENT (on contract)	02	AIISH, Mysore.

Education Qualification and Experience:

Post Code 1: Lecturer in ENT:

Method of Recruitment: On Contract	
No. of posts	02 posts
Age	Below 35 years
Duration of contract	For a period of 06 months (or) until the regular posts are filled; whichever is earlier.
Consolidated Remuneration	Rs.77,400/- per month and no other allowances are admissible.
Essential Qualification	M.S (ENT) or an equivalent degree recognized by Medical Council of India.
Desirable Qualification	a) 2 years clinical experience in a recognized Institution / Hospital. b) Publication in National and International journals.

GENERAL CONDITIONS / INFORMATION

- 1 The filling up of the above posts shall be on need basis and **purely temporary**.
- 2 **The engagement of the candidates for the post of Lecturer in ENT (on contract basis) does not confer any right or title to claim a permanent appointment at this Institute.**
- 3 All the details furnished in the offline application will be treated as final and no changes shall be entertained.
- 4 Applications without **photograph, signature, and necessary certificates in support of their application shall be summarily rejected in the screening itself.**
- 5 The qualifications prescribed should have been obtained through recognized Universities/ Institutions.
- 6 The prescribed Essential Qualifications are a bare minimum and mere possession of it, will not entitle the candidates to be considered for the post. The candidates should furnish all the Qualifications and Experience possessed in the relevant field, over and above the minimum qualifications prescribed for consideration of their candidature.

- 7 The upper age limit will be reckoned as on the last date prescribed for receipt of applications.
 - 8 **Candidates should mention postcode and name of the post in their application form with passport size photo affixed, proof for DOB, experience certificates and copies of education qualification, such as MBBS (all semester marks sheets, MBBS Degree certificate), M.S (ENT) (all semester marks sheets, M.S. (ENT) Degree Certificate, Certificate of Registration in Medical Council of India (MCI) and other relevant certificates, Grade conversion certificate with self-attestation to be submitted wherever applicable. Otherwise, the application shall be summarily rejected in the screening itself.** Candidates should also indicate the name of the post, postcode in the application.
 - 9 **The last date of receipt of applications is 20.12.2023 at 5.30 P.M.**
 - 10 The applications received in response to the advertisement will be scrutinized and only shortlisted candidates will be considered for further selection process.
 - 11 The appointment of the selected candidates is subject to being found medically fit as per the requirements of the Institute.
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- 12 Teaching skill test / Personal Interaction or Interview shall be conducted if necessary and details will be notified in the AIISH website. Further, the eligible candidates will be informed of it in due course.
The appointment of the selected candidates is subject to being found medically fit as per the requirements of the Institute.
 - 13 **The competent authority reserves the right to accept or reject any application without assigning any reasons.**
 - 14 **The competent authority reserves the right not to fill all or any of the posts mentioned in the advertisement.**
 - 15 **Canvassing in any form and/or bringing in any influence political or otherwise will be treated as a disqualification for the post.**
 - 16 Email's / phone calls related to recruitment / Interim enquiries and other enquiries will not be attended to
 - 17 Candidates should regularly visit our website for www.aiishmysore.in for latest updates through notifications, instructions, and circulars relating to this recruitment process. No separate communication in this regard will be sent

HOW TO APPLY:

a) The application may be downloaded from our website www.aiishmysore.in.

b) Interested candidates who meet the requirement, may send their **Applications** along with **Self attested copy** of necessary certificates in support of their **DOB proof, educational qualification certificates i.e., MBBS (all semester marks sheets, MBBS Degree certificate), M.S (ENT) (all semester marks sheets, M.S. (ENT) Degree Certificate, Certificate of Registration in Medical Council of India (MCI) and other relevant certificates, Grade conversion certificate, experience certificates and other relevant certificates** to be submitted to Office of the Chief Administrative Officer, All India Institute of Speech and Hearing, Manasagangothri, Mysore-570006 **on or before 20.12.2023 at 5.30 PM.**

c) Envelope should be super-scribed **“Application for the post of.....”**, **“Post Code.....”**

d) Application fee:

For General Category, OBC and EWS candidates – ₹600/-

For candidates belonging to SC/ST categories - ₹250/- for

For **women and PWD candidates - exempted** from payment of application fee.

Copy of transaction receipt should be enclosed along with the application form.

Application without application fee will be summarily rejected.

e) Applications received after the last date or with insufficient information would not be considered.

f) Method of payment of application fee: 1. BHIM QR CODE



2. Payment thro' NEFT:

1.	BENEFICIARY NAME & POSTAL ADDRESS	DIRECTOR ALL INDIA INSTITUTE OF SPEECH & HEARING, MANASAGANGOTHRI, MYSORE 570 006
2.	NAME OF THE BANK	BANK OF BARODA
	BRANCH NAME WITH COMPLETE ADDRESS	AIISH BRANCH, NAIMISHAM CAMPUS MANASAGANGOTHRI, MYSORE KARNATAKA - 570 006
	BRANCH CODE No.	9832
3.	IFSC CODE OF THE BRANCH	BARB0EXTMYS [BARB(ZERO)EXTMYS]
4.	ACCOUNT NUMBER	98320100000664
5.	TYPE OF BANK ACCOUNT (SB/CURRENT)	SAVINGS BANK ACCOUNT

The candidates should mention the prescribed application fee details in the Application also (Transaction ID/UTR reference no and date of payment)

Please mention in the Remarks / Purpose of the transaction as:

➡ Application fee for the post of

➡ Application fee for the post code.....

Candidate has to provide the following details of the payment in the application form and **attach proof of payment in the application:**

Transaction ID/ UTR reference no:

Date of Payment:

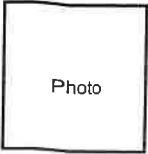
M. R. Ramesh
DIRECTOR

Advt. No. 12/2023 dated: 24.11.2023

Advertisement No: 12/2023 dt.24.11.2023
Closing date: 20.12.2023



Application fee payment details:	
Transaction ID/UTR
Date of payment
Amount Paid



ALL INDIA INSTITUTE OF SPEECH AND HEARING, MYSORE - 570 006
(An Autonomous Body under Ministry of Health & Family Welfare, Govt of India)

APPLICATION FOR THE POST OF Post Code.....

1. Name of the Candidate (BLOCK LETTERS)
Mr / Mrs / Ms / Dr.

2. Gender:

Male Female Transgender

3. (a) Address for Communication

.....
.....
.....
.....
.....

(b) Email ID

(c) Mobile Number

(d) Aadhar No.

(e) Permanent Address

4. (a) Date of Birth

DD MM YYYY
Years Months Days

(b) Age as on last date of Application

(c) Place of Birth

5. Are you:

(a) a citizen of India by birth and / or by domicile?

(b) If not, indicate the Nationality

6. Name the state to which you belong

7. (a) Father's Name

(b) Father's Occupation

Govt. Private others

(c) Mother's Name

(d) Mother's Occupation

Govt. Private others

8. State whether you are a member of Scheduled Caste / Scheduled Tribe / OBC / EWS / UR / PwBD (if so, please produce an attested copy in support)

SC ST OBC

UR EWS PwBD

9. (a) Academic Qualification:

(Note: Percentage should be calculated strictly in accordance with the Rules & Regulations of the respective university / board (as awarded in Degree Certificate & the copy of percentage conversion certificate received from university/college should be attached alongwith the application).)

Examination (Name of the Board/University)	Percentage of marks obtained	CGPA	Major Subjects	Year of passing	Class
SSLC / X					
HSC / XII					
Diploma / Certificate					
Bachelor Degree					
Master Degree					
Ph.D					

9. (b) Other Qualifications:

(Note: Sufficient information to be provided in respect of other qualifications, other than 9 (a) above, wherever applicable, as per the Recruitment rules for respective posts)

Course / Examination	Percentage of marks obtained	CGPA	Major Subjects	Year of passing	Class

9. (c) Medical Council of India Registration details:

MCI Registration No: Date of Issue of Certificate:..... Validity till:

10. Are you Involved in any court cases

yes NO

19. Are you willing to accept the minimum initial pay offered ? If not, state what is the lowest initial pay that you would accept in the prescribed scale of pay/level in pay matrix.		
20. How early you can join this institute, if selected?		
21.	Reference: Give names / address of three professionals in the field who are in a position to comment on your professional work (The institute may write to them for a confidential assessment of the candidate's capabilities)	
	Name / Address	Designation
1.		Telephone / Mobile / & Email
2.		
3.		
22. Briefly explain (within 50 words) how you are suitable for this post.		
23. List of enclosures		
<ul style="list-style-type: none"> (a) (b) (c) (d) (e) (f) (g) 		

DECLARATION

I, hereby declare that the information given in this application is true and correct to the best of my knowledge and belief. If any information is found false, my candidature may be disqualified without prejudice to any action that may be taken under the rules.

Place:

Date:

.....
Candidate's Signature

**ENDORSEMENT BY THE EMPLOYER
(where the candidate is presently employed)**

Note: Candidates, who are in regular service / permanent post at present, should obtain an endorsement given below from his / her employer.

Ref. No.....

Date

Mr./ Mrs./ Ms./ Dr., joined at this Institute on..... as.....(Designation) and is at present employed as.....(Designation) a Permanent employee in this office. He / She will be relieved if selected, without delay. His / Her present salary structure is as below.

- Level in pay matrix:..... Cell:
- Basic Pay: as on
- DA:.....
- Others:.....

Signature of Issuing Authority:

Designation & Seal of Issuing Authority: