# Rehabilitation Council of India (A Statutory Body under the Ministry of Social Justice & Empowerment) Department of Disability Affairs B-22, Qutub Institutional Area, New Delhi-110 016 Telephone 011-26532408, 26534287, Fax 011-26534291

### Advt. No. 2/2014

Applications are invited from the eligible candidates for filling up the post of Member Secretary on deputation basis in RCI as per the details given below:

1. Name of Post : **Member Secretary** 

Group 'A', Ministerial

(i) No. of vacancies : 1(one)

(ii) Scale of pay : PB-4 Rs.37400-67000 + GP Rs. 8700

2. Eligibility : Officers under Central/State

Government/

Universities/Recognized Research

Institutes/ Public Sector

Undertaking/Semi

Government/Autonomous/Statutory

Organization, holding

(a) (i)Analogous posts on regular basis,

or

(ii) Posts in PB-3: Rs.15600-39100 plus Grade Pay Rs.7600 with 5 years regular service in the grade

(iii) Posts in PB-3: Rs. 15600-39100 plus Grade Pay Rs.6600 with 8 years regular service in the grade.

(b) Possessing the following qualification:

(i) Master's Degree from a recognized University or its equivalent

 (ii) Ten years experience in responsible administrative capacity and in the field of rehabilitation of disabled.

### **General Conditions**

- Interested candidates may apply in the prescribed proforma available on website <a href="www.rehabcouncil.nic.in">www.rehabcouncil.nic.in</a>. The applications complete in all respects along with self attested copies of proof of age, educational qualification, experience etc. should reach the Member Secretary, Rehabilitation Council of India, B-22, Qutub Institutional Area, New Delhi-110 016 within 45 days from the date of publication of this advertisement in Employment News/Rozgar Samachar.
- The applications should be sent through proper channel duly accompanied with attested copies of last five years ACRs/APARs, integrity Certificate, Vigilance Clearance certificate and details of major/minor penalties imposed during last 10 years.
- The deputation will be governed by the usual terms and conditions issued by DOP&T from time to time as applicable to Central Govt. Department/Organizations.
- Period of deputation including period of deputation in another ex-cadre post held immediately preceding this appointment in the same or some other organization or department shall not ordinarily exceed three years. The maximum age limit for transfer on deputation shall not be exceeding 56 years as on the closing date of receipt of applications.
- The applications received without requisite documents will be summarily rejected. The department while forwarding applications may please ensure that the officials who volunteer for the post shall not be allowed to withdraw their names later on. Advance copy of the application may be considered if received by the closing date, followed by application received through proper channel.
- Only short listed candidates will be called for Interview. The Council, however, reserves the right to cancel or withdraw the vacancy without assigning any reason.

**Member Secretary** 

### REHABILITATION COUNCIL OF INDIA

## <u>APPLICATION PROFORMA</u> - (<u>FOR DEPUTATION ONLY</u>)

Application Proforma for the post of	
	Please Affix
1. Name and Address (in Block Letter):	Your Recent
with telephone/mobile number	Passport Size
2. Father's Name:	Photograph
3. Date of Birth (in Christian Era):	duly attested
4.Date of retirement ( where applicable : under Central/ State Govt. Rules)	
5.Educational Qualification :	
6 Whether educational and other qualifications required for the post are satisfied (if an	v qualification

6. Whether educational and other qualifications required for the post are satisfied (if any qualification has been treated as equivalent to the one prescribed in the Rules, state the authority for the same)

		Qualifications/Experience required	Qualifications/Experience Possessed by the Applicant
Essential	1		
	2		
	3		
Desired	1		
	2		

- 7.Please state clearly whether in the light of entries made by you above, you meet the requirements of the post: Yes/No
- 8. Details of Employment, in chronological order starting with the latest. Enclose a separate sheet duly authenticated by your signature, if the space below is insufficient.

Organization	Post held/Designation	From	То	Scale of Pay with GP, if any and the Basic Pay	Nature of duties (in details)

9. Nature of present employment i.e. Ad-hoc or Temporary or Permanent.

10.In case the present employment is held on deputation/ contract basis, please state-

- (a) The date of initial appointment
- (b) Period of appointment on deputation/ contract.
- (c) Name of the parent office/organization to which you belong
- 11. Additional details about present employment. Please state whether working under (indicate the name of your employer against the relevant column)-
  - (a) Central Govt.
  - (b) State Govt.
  - (c) Autonomous Organization
  - (d) Government Undertaking
  - (e) Universities
  - (f) Others
- 12. Please state whether you are working in the same department and are in the feeder grade or feeder to feeder grade.
- 13 Are you in Revised Scale of Pay? If yes, give the date from which the revision took place and also indicate the pre-revised scale.
- 14. Total emoluments per month now drawn.
- 15. Additional information, if any, which you would like to mention in support of your suitability for the post.
- 16. Whether belong to SC/ST/ OBC/.PwD (OH, B, LV, HI)
- 17.Remarks [The candidates may indicate information with regard to (i) Research publication and reports and special projects (ii) Awards/ Scholarship/ Official Appreciation (iii) Affiliation with the professionals bodies/ institutions/ Societies and (iv) any other information.]

(Note: Enclose a separate sheet if the space is insufficient).

I h	ave caretu	lly gone t	:hrough the	e Vacancy	circular/ad	vertisen	nent ar	nd I am	well av	vare t	hat
the curricul	lum Vitae	duly supp	orted by	documents	submitted	by me	will al	lso be a	assesse	d by	the
Selection C	Committee	at the time	e of selecti	on for the p	oost.	•				•	

Date		Signature of the candidate
		Address
	COUNTERSIGNED	
	(Employer with seal)	

# CERTIFICATE TO BE FURNISHED BY THE EMPLOYER/FORWARDING AUTHORUITY

it is also certified that there is no Crim	inal/vigilance/Disciplinary	case either pending or being
contemplated against Shri/Smt/Kum		, presently working with this
Dept/Organization as	since	·
2.His/her integrity is certified as beyond dou	ıbt.	
3.No major or minor penalty was imposed of	on Shri/Smt./Kum	during the last 10 years.
4. The attested copies of the ACRs/APARs f	or the last 5 years are end	closed.
Place:		Countersigned
Dates:		(Employer with seal)