

## NATIONAL INSTITUTE FOR EMPOWERMENT OF PERSONS WITH MULTIPLE DISABILITIES (Divyangjan)

(Dept. of Empowerment of Persons with Disabilities (Divyangjan),
(Ministry of Social Justice & Empowerment, Govt. of India)
Muttukadu, East Coast Road, Kovalam (P.O), Chennai - 603 112
Tamil Nadu – India. Phone: 044 – 27472046, 27472104, 27472113, 27472423
~ Accredited by NAAC~ ~ ISO 9001:2015~



## MANPOWER ENGAGEMENT NOTIFICATION: CONSULTANT No. 09/2025

Date: 23.07.2025

The Director, NIEPMD(D), Chennai invites applicants for a walk-in interview/selection process to engage Staff on contract for the **Title of the Project:** "Aging with Multiple Disabilities: A Comparative Study across Adolescence, Early Adulthood and Adulthood"

**Venue:** NIEPMD, East Coast Road, Muttukadu, Chennai - 603 112.

**Date:** 14.08.2025

<u>Time:</u> 11.00 AM

S1.	Name of the	No. of	Qualification	Remuneration
No	Position	Vacancy		
1.	Research	01	Essential:	Rs.40,000/- per
	Assistant		1. MSW Graduate from a recognized	month
	(Consultant)		University with knowledge of	(Consolidated
	,		computer.	Pay)
			Desirable:	
	(Duration: 8		1. Experience of working as a Research	
	months)		Assistant in a Govt. funded project for	
			disabilities.	
			2. Proficiency in English and Tamil.	
			3. Working knowledge in computer	
			application. Editing, Compilation,	
			Manual Preparation Etc.,	

## Note:

- This engagement will be purely temporary and only for a period of 8 months and the engagement will cease after the 8<sup>th</sup> month without any notice.
- The incumbent will be paid consolidated honorarium only. No other allowances such as DA/HRA/MA/GPF/NPS and other allowance will be admissible.
- The incumbent will have **NO RIGHT** to claim for any regularization or extension/ renewal of engagement in any circumstances.
- Candidate to bring filled in application in the prescribed format (Attached).
- NIEPMD will retain data of applications received from non-shortlisted candidates only for a period
  of three months after completion of recruitment process i.e., the issuance of offer letter to the
  selected candidate.
- Candidates has to report with all testimonials/certificates in original and one set of self-attested true copies. Two passport size photographs. Aadhar or any valid ID proof.
- The Institute reserves the right to cancel the advertisement or part thereof without assigning any reasons.
- The Candidates are requested to report before 11.00 A.M on 14.08.2025.

Sd/-DIRECTOR NIEPMD



(If yes, mention the category of Disability with relevant Certificate)

## National Institute for Empowerment of Persons with Multiple Disabilities (Dept. of Empowerment of Persons with Disabilities (Divyangjan), Ministry of Social Justice & Empowerment, Govt. of India) East Coast Road, Muttukadu, Kovalam (Post), Chennai-603 112.



Tele – Fax: +91-44-27472389, Telephone: 27472104, 27472113.

Toll Free No: 18004250345 Website: www.niepmd.nic.in E-mail: niepmd@gov.in **Application form** Recent Passport size Photograph (5 cm X 4.5 cm) to **Post Applied For:** be affixed &attested 1. Advertisement No/Date: 2. Name in Applicant: (in full Block Letters): D D YYYY M<sub>M</sub> 3. Date of Birth: (enclose Copy of Certificate) Citizen of India By Birth By Domicile 4. Citizenship Status: (Please Tick) 5. Aadhaar No: 6. RCI/MCI Registration No: (Applicable in case of Faculty &Technical Positions) 7. Name of Father/Spouse: NRI Indian Foreign 8. Nationality: 9. Gender: Male Female others SC ST OBC General Ex-Service man 10. Category: Attach certificate) Category No 11. Are you Persons with Disability: Yes OH | others

12. Address for Communication: House No & Street Name	
Village/City:	
District:	
Post Office:	
State:	
Pin-code:	
Phone No(Land Line):	
Mobile No:	
Email ld:	

13. Details of Education starting from Matric (SSLC/X Std.,) onwards :- (to give details only onpassed courses &where Degree/Certificates etc., are already awarded/issued):

Academic Qualification	Discipline	University /Inst/Board	Year & Month of Entry	Year & Month Passed	Full Time/Part Time/Correspondence	% of Marks

14. Additional Qualification / Certificate Courses if any (Training, Apprentice programs attended, refresher courses completed etc.)

Course	Duration	Certificate/ Organization	Whether Govt authorized/recognized	Class/Mark/details

15. Experience in chronological order upto the present post: (Attach a separate sheet if required)

Name of Organization/	Designation/ Post held	whether on Regular Basis or on Deputation or on Contract Basis etc.,)	Salary drawn (Pay band + G.P to be mentioned in case of Govt. organization)	From	То	Nature of Work presently dealing with(attach proof/experience certificate	Total period of Exp in Years & Months

	one page):	IS
	ference of three persons with whom you have ction during your work or study period)	
S.No	Names, Designation and Address with Phone No & Mail ID	
1		
2		
3.		
	y other relevant information the applicant want to mention, if any (at s if necessary):  DECLARATION OF THE APPLICANT	tach additional
inform	I hereby declare that the information given above is correct to edge and belief and I fully understand that if it is found at a lat nation given in the application is incorrect / false or if I do not sat a, my candidature / appointment is liable to be cancelled / terminated	er date that any isfy the eligibility
Place Date:	Signature of t	the Applicant
	Jighttare Of	

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