## राष्ट्रीय मानसिक स्वास्थ्य पुनर्वास संस्थान, सीहोर

National Institute of Mental Health Rehabilitation, Sehore दिव्यांगजन सशक्तिकरण विभाग, सामाजिक न्याय और अधिकारिता मंत्रालय, भारत सरकार

Department of Empowerment of Persons with Disabilities (Divyangjan), Ministry of Social Justice & Empowerment, Govt. of India.

भोपाल इंदौर हाईवे, शेरपुर, सीहोर, मध्य प्रदेश - ४६६००१

Bhopal Indore Highway, Sherpur, Sehore, Madhya Pradesh – 466001

वेबसाइट / Website: https://nimhr.nic.in, फोन / Phone: 0756-2223960, ईमेल / Email: nimhrsehore@gmail.com

## **Application Format for Group A Posts**

Application No.

Employment Notification No.

Paste self

attested

Ap	plication for the post of					passport size		
Application Fee details		DD No.	Date	Amount	Bank	photo	ograph of adidate	
1.	Name of the applicant (in capital letters)							
2.	Father / Husband Name							
3.	Date of Birth							
4.	Gender							
5.	Nationality							
6.	Religion							
7.	Category							
8.	Are you PWD							
9.	Present Postal Address							
10.	Contact No.							
11.	E Mail ID							
12.	Permanent Address							
13.	Educational/Technical Qualifications (from 10th equivalent and onwards)	Exam h or Passed	Name of School/Coll University		Percentage of Marks	Year o Passing	fSubjects Taken	
							+	
						_!		

14.		Post held (Designation / Post / Nature)	Salary Drawn (Pay Band + G.P to mentioned in case Govt. Organization	Organization be of	Duration With dates	Nature of duties
	thana H.No./lane	s. In case of stay ning the age of 2 address in ful and dis /street/road and	abroad, particulars 11 years would be g 1 (i.e., village, Nam strict or plac	s of all places where	you have read Quarte	esided for
	Do you have any relatives in NIMHR					
	Innovative and Developmental works undertaken					
	Details of published research articles, if any					
19.	Significant Achievements					
	Why you think you are suitable for the post you have applied for (Details within one page)					
Date	e:					
Plac	ce:					
				Signa	iture of the	Applicant