COMPOSITE REGIONAL CENTRE FOR SKILL DEVELOPMENT, REHABILITATION & EMPOWERMENT OF PERSONS WITH DISABILITIES [CRC – KOZHIKODE]





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



Golf Link Road, Chevayur P.O., Kozhikode, Kerala – 673 017 Phone: 0495 – 235 33 45 Email: crckozhikode@gmail.com

VACANCY NOTIFICATION (TEMPORARY): No. 09/2024-25/CRCK/NIEPMD ENGAGEMENT OF ASSISTANT HRD (CONSULTANT)

Applications are invited from eligible Indian Nationals for engagement to the position of **ASSISTANT HRD (CONSULTANT)** on contract basis at Composite Regional Centre for Skill Development, Rehabilitation and Empowerment of Persons with Disabilities, Kozhikode, Kerala (CRC-K) under administrative control of NIEPMD (D), Chennai.

S.No	Name of the Position	No. of vacancies	Maximum Age limit	Consolidated monthly Honorarium	Qualification and experience
1	Assistant HRD (Consultant)	01	56 years	Rs. 45,000/- per month	Essential: (i) Graduate from a recognized University with knowledge in Computer Operation. (ii) Minimum two (02) years' experience in Administrative / Academic works in Govt. Department / reputed organization.

IMPORTANT NOTE:

- i. The above consultant positions will be filled purely on contractual basis for a period of 11 months.
- ii. Engagement will be governed by the rules and regulations, terms and conditions of the engagement of the Institute presently in force or as may be framed, amended, altered or extended from time to time by the Ministry.
- iii. A fixed monthly amount shall be admissible and the remuneration may be regulated as per the terms and conditions of the contract. No other allowances will be admissible.
- iv. Paid leave of absence may be allowed @ 1.5 days for each completed month of service.
- v. The contractual appointment would be on full time basis and they would not be permitted to take up any other commercial assignment during the period of consultancy.
- vi. Any other assignments given to the staff to be carried out time to time

- vii. The HRD staff shall be assigned duties aimed towards the objectives of Institute and National Institute & DEPWD at large.
- viii. The engagement of contractual staff can be terminated by the competent authority at any time without assigning any reasons thereof by giving 30 days notice. However, in case a Consultant/Contractual staff wishes to resign, he/she can resign by giving 30 days advance notice or remuneration in lieu thereof before resigning from the engagement.
- ix. Bringing in any type of Political/Official interference, influence, canvassing, other pressures in any form etc., will render disqualification of the candidature and action will be taken against such candidates. No correspondence in this matter will be entertained.
- x. CRC Kozhikode will retain data of applications received from non-shortlisted candidates only for a period of six months after completion of Engagement process i.e., the issuance of offer letter to the selected candidate.
- xi. Maximum age limit for all post is 56 years. The age shall be reckoned as on closing date of receipt of application.

APPLICATION FORM DULY FILLED IN, SUPPORTED WITH SELF-ATTESTED PHOTOCOPIES SHOULD BE SUBMITTED WITHIN 21 DAYS FROM PUBLISHING OF THE ADVERTISEMENT IN THE EMPLOYMENT NEWS TO THE DIRECTOR, CRC KOZHIKODE, GOLF LINK ROAD, CHEVAYUR P.O., KOZHIKODE, KERALA – 673 017.

Sd/-DIRECTOR CRC Kozhikode

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Notification No. 09/2024-25/CRCK/NIEPMD

Application form for Contractual Post: Assistant HRD (Consultant)

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	Post Applied For:	Assistant HRD (Consultant)												
1.	Name of Applicant: (in full Block Letters):													
2.	Date of Birth: (Enclose Copy of Certification	tte of Birth: nclose Copy of Certificate) D D M M Y E A R Age												
3.	Citizenship Status: Citizen of India By Birth By Domicile													
4.	(Please Tick) Aadhaar No:													
5.	5. RCI/MCI Registration No: Applicable in case of Faculty & Technical Positions)													
6.	. Name of Father/Spouse:													
7.	Nationality:													
8.	Gender:	Male Female others												
9.	Category: (Attach certificate)	SC ST OBC General Ex-Service man												
10	Are you Persons with Disa others													
Di	(If yes, mention the categorsability with relevant Certif	•												
11.	Address for Communication	on:												
	House No & Street Nan													
	Village/City	/:												
	District:													
	Post Office:													
	State:													
	Pin-code:													
	Phone No (Land Lir	ne):												

Mobile No:																
Email Id:																
	Г														Τ	Τ
2 Details of Education starting	from Mat	ric	(22	IC	/ Y	Ctd) (nu	ard	g•	(to	oix	ıe d	leta	ile	only

12. Details of Education starting from Matric (SSLC/X Std.,) onwards: - (to give details only on passed 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

13. 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

14. 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

15. Why you think you are suitable for the post you have applied for (Details within one page) attach separately):

16.Reference of three persons with whom you have interaction during your work or study period)

S.No	Names, Designation and Address	Phone No & Mail ID
1		
2		
3.		

17. Any other relevant information the applicant want to mention, if any (attach additional sheets if necessary):

DECLARATION OF THE APPLICANT

I hereby declare that the information given above is correct to the best of my knowledge and belief and I fully understand that if it is found at a later date that any information given in the application is incorrect / false or if I do not satisfy the eligibility criteria, my candidature / appointment is liable to be cancelled / terminated.

Place:															
Date :	Γ] [T		· 	T					•	•		
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