

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



(Under the administrative control of NIEPMD, Chennai)  
Department of Empowerment of Persons with Disabilities (Divyangjan)  
**Ministry of Social Justice & Empowerment, Government of India**  
CRC Campus, Chevayur P.O., Kozhikode, Kerala – 673 017



**VACANCY NOTIFICATION (TEMPORARY): No. 01/2025-26/CRCK/NIEPMD**  
**ENGAGEMENT OF ASSISTANT PROFESSOR SPEECH & HEARING (CONSULTANT)**

The Director, CRC Kozhikode invites eligible applicants for a walk in interview / selection process to engage suitable candidate on a short term temporary position (Consultant) to be filled on contractual basis at Composite Regional Centre for Skill Development, Rehabilitation & Empowerment of Persons with Disabilities, Kozhikode (CRC-K).

**Venue: CRC Kozhikode, CRC Campus, Golf Link Road, Chevayur P.O., Kozhikode, Kerala – 17.**

**Date: 04 June 2025 (Wednesday) 10:00 A.M.**

S.No	Name of the Position	No.	Upper Age Limit	Honorarium per month	Qualification and experience
1	Assistant Professor Speech & Hearing (Consultant)	01	56 Years	Rs. 75,000/- per month	<b><u>Essential:</u></b> <ul style="list-style-type: none"><li>- Post Graduate Degree (Full time course) in Speech language and/or Audiology (Recognized by RCI).</li><li>- Valid RCI registration.</li><li>- Minimum 5 years clinical / teaching /research experience in related field.</li></ul> <b><u>Desirable Qualification:</u></b> <ul style="list-style-type: none"><li>- Ph. D in the field of rehabilitation of Persons with Disabilities.</li><li>- Experience in working for persons with multiple disabilities.</li></ul>

**Note:**


- This engagement will be purely short term temporary basis and only for a period of up to six (06) months or till the post is filled up on deputation basis, whichever is earlier.
- The incumbent will be paid honorarium on monthly basis only. No other allowances such as DA/ HRA /MA/ GPF/ NPS and other allowance will be admissible.
- The incumbent will have no rights to claim for any regularization or extension/ renewal of engagement in any circumstances.
- No application fee will be charged. Candidate to bring filled in application in the prescribed format.
- Candidates 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.
- If the number of applicants are more, a written test will be conducted to shortlist for interview.

Sd/-  
Director  
CRC Kozhikode

**Notification No. 01/2025-26/CRCK/NIEPMD**

**Post Applied For:**

**Assistant Professor Speech & Hearing  
(Consultant)**



1. Name of Applicant:  
(in full Block Letters):

D D M M Y E A R Age

2. Date of Birth:  
(Enclose Copy of Certificate)

3. Citizenship Status: Citizen of India By Birth By Domicile  
(Please Tick)

4. Aadhaar No:

5. RCI/MCI Registration No:  
(Applicable in case of Faculty & Technical Positions)

6. Name of Father/Spouse:

7. Nationality: Indian Foreign NRI

8. Gender: Male Female others

9. Category : SC ST OBC General Ex-Service man  
(Attach certificate)

10. Are you Persons with Disability: Yes No OH VI HI  
others  
(If yes, mention the category of  
Disability with relevant Certificate)

11. Address for Communication:

House No & Street Name

Village/City:

District:

Post Office:

State:

Pin-code:

Phone No (Land Line):

[illegible][illegible][illegible][illegible][illegible]

14. Experience in chronological order upto the present post:-

*(Attach a separate sheet if required)*

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

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 : 

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Date : 

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D D   M M   Y E A R

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Signature of the Applicant