NATIONAL INSTITUTE FOR THE EMPOWERMENT OF PERSONS WITH VISUAL

nepvd

DISABILITIES (DIVYANGJAN) (NIEPVD)

(Department of Empowerment of Persons with Disabilities)(Divyangjan) Ministry of Social Justice & Empowerment, Govt. of India 116, Rajpur Road, Dehradun-248001 Uttarakhand (India).



Advertisement No. 5-2/2024-0031

Dated: 29th Oct, 2024

WALK-IN-INTERVIEW

Applications are invited from the eligible candidates to apply and attend the walk-in interview for the following position (purely contract basis) on 11.11.2024 between 9.30 a.m. to 10.30 a.m. at NIEPVD Dehradun (Uttarakhand). The registration will close at 10.30 a.m sharp.

The Essential, desirable qualification and experience for the position(s) are as under:-

| Sl. No. | Name of the Posts | No. of Posts | Qualifications | Fixed remunerat ion per month with no other allowance | Duration |
|------------|---|-----------------|--|---|----------|
| 1. | Master Trainer (deaf) (Consultant) | 01 | Educational Qualification:- Graduate + Certificate in C Level /DTISL+3 Year experience | 45,000/- | 11 Month |
| 2. | Indian Sign Language Interpreter (Consultant) | 01 | Educational Qualification:- Graduate + Certificate in C Level/DISLI OR 12th + Certificate in C Level/DISLI | 40,000/- 35,000/- | 11 Month |

GENERAL CONDITIONS:-

- 1. This engagement will be purely on temporary basis. Renewal of engagement for further period is subject to project need and performance of the individual consultant.
- **2.** Application(s) should be made on the prescribed form, which can be downloaded from the Institute's website <u>niepvd.nic.in</u>.
- 3. <u>Application fee</u>: @Rs. 500/- (Rupees Five Hundred only) for General, OBC & EWS category

: @Rs. 250/- (Rupees Two hundred fifty only) for SC/ST category Persons with Disability (Divyangjan) are exempted from payment of above mentioned fee.

- **4.** Only online mode of payment will be accepted. The link of the online payment is <u>https://vac.niepvd.in/</u>. The link is also available on the Institute's website Home Page. After making payment the printout for payment confirmation having transaction id is to be enclosed along with manual application.
- 5. He/she should all necessary **Original Certificate** pertaining to the following:-
 - Educational Qualifications
 - Technical/Professional Qualifications
 - Certificate of Date of Birth
 - Certificate of Experience
 - No Objection Certificate, if any
- **6.** In case any mistake in selection process is detected, the Institute reserves the right to modify/ withdraw/cancel any communication made to the candidates.
- 7. The Director, NIEPVD Dehradun reserves the right to fill or not to fill the post(s) without assigning any reason thereof.
- 8. Corrigendum, if any shall be posted on the Institute website only. (<u>niepvd.nic.in</u>)
- 9. Interim correspondence will not be entertained and replied to.
- **10.** Any dispute with regard to the selection/recruitment process will be subject to Courts/Tribunals having jurisdiction over Dehradun.

Sd/-

Director, NIEPVD, Dehradun

Annexure -I

Application No. ______ (*To be filled by the office*)

APPLICATION FORM

To,

| Na Pei | e Director, tional Institute for tl rsons with Visual Dis 6, Rajpur Road, Deh | Paste a recent passport size photo | | |
|-----------|--|--|---|--|
| Ad | vertisement No. & D | Date:- No. | 5-2/2024-0030 dated: 10 th Oct, 2024 | |
| | (Note: APPLICAT | ION TO BE | <u>E FILLED IN BLOCK LETTERS ONLY)</u> | |
| 1. | Applied for the pos | st : | | |
| 2. | Particulars of attac | ched fee pa | yment: Receipt Amount | |
| Tr | ansaction ID/Receip | ot No. | | |
| | Name (in block lett | - | : | |
| 4. 5 | Gender | | | |
| | | | Monwind/Single | |
| 6. 7 | Date of Birth | | Married/Single | |
| | | | | |
| | - | | tion: | |
| 9. | Nationality | | | |
| | a. Postal Address | : | | |
| | Permanent: | | | |
| | | | | |
| 10 | | | | |
| 10 | Category : | | .) | |
| 11 | (UR/OBC(NCL)/SC/ | | | |
| 11 | . Are you a PwDs (I | | | |
| | | | | |
| 12 | . UDID No. (If any): | | | |

(Signature / Left Hand Thumb Impression of Candidate/ applicant)

| 13. AADHAR NO (optional | ll for identity proof): | | | | | |
|---|-------------------------|--|--|--|--|--|
| 14. Are you an Ex-servicer | nen : Yes/No | | | | | |
| (a) If Yes, Date of Disc | harge/ retirement : | | | | | |
| (b) If Yes, Name of Organisation: Indian Air Force/ Navy/ Army/ Coast Guard | | | | | | |
| 15. Contact Details | : | | | | | |
| a. Mobile Number | : | | | | | |

b. Email Id

16. Valid CRR No. (if applicable) :

17. Details of employment (beginning with the Present Post):

:

(If required, additional sheets may be enclosed in the same format as

| Office/ Institution employed | Date of Joining | Date of Leaving | Post held/ Designation | Scale of Pay with Grade Pay/Level | Basic Pay Rs. | Total Salary (Gross) Rs. | Nature of Duties |
|------------------------------------|--------------------|--------------------|---------------------------|--|---------------------|-----------------------------------|---------------------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

appended)

18. Educational Qualification (Commencing with Matriculation): (If required, additional sheets may be enclosed in the same format as appended)

| Examination Passed | University/ Board | Year of Passing | Class/Div ision /Grade | % of Marks | Subjects offered |
|-----------------------|----------------------|--------------------|------------------------------|---------------|------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

(Signature / Left Hand Thumb Impression of Candidate/ applicant) 19. Professional Achievements (in 150 words)(running letters)(If required attach additional sheet and under signed by applicant):

20. Proficiency in Computer if any: (*Please specify the level of accomplishment & attach certificate.*) 21. Hobbies:

APPLICANT'S DECLARATION

I hereby declare that in the event of information or part thereof being found incorrect at any stage, my candidature/appointment is liable to be cancelled/terminated without any notice to me and action can be taken against me. Further, I understand that this position is purely temporary on contract basis for limited time period and my contract period can be anytime terminated as per the decision of the Management/Administration/Competent Authority of the Institute.

Place :

Date:

(Signature / Left Hand Thumb Impression of Candidate/ applicant)