



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
Golf Link Road, Chevayur PO, Kozhikode, Kerala – 673 017



ENGAGEMENT NOTIFICATION (TEMPORARY)
NO. 12/2024-25/DISLI/CRC-K/NIEPMD

The Director, CRC Kozhikode invites applicants for a walk in interview / selection process to engage suitable candidate on a temporary position (Consultant) to be filled on contractual basis at CRC Kozhikode.

Venue: CRC Kozhikode, Golf Link Road, Chevayur P.O., Kozhikode, Kerala – 17
(Phone: 0495-2353345).

Date: 29-01-2025 (Wednesday) at 11:00 A.M.

S.No.	Name of the Position	No. of vacancy	Maximum Age Limit	Consolidated Honorarium per month	Qualification and experience
1	Master Trainer (Deaf) - (Consultant)	01 No.	56 years	Rs. 45,000/-	Essential Qualifications: <ul style="list-style-type: none">Graduate from a recognized UniversityCertificate in 'C' level (or) Diploma in Teaching Indian Sign Language (DTISL) course recognized by RCI with 3 years relevant teaching experience.Valid RCI Registration

IMPORTANT NOTE:

- The engagement will be purely temporary and only for a period of 03 years.
- Paid leave of absence may be allowed @ 1.5 days for each completed month of service.
- 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).
- CRC Kozhikode will retain data of applications received from non-shortlisted candidates only for a period of six months after completion of recruitment process i.e., the issuance of offer letter to the selected candidate.
- ***The Institute reserves the right to cancel the advertisement or part thereof without assigning any reasons.***
- Candidates to report with all testimonials/certificates in original and one set of self-attested true copies. One passport size photograph. Aadhar or any valid ID proof.
- **The Candidates are requested to report before 10.00 AM on 29-01-2025 (Wednesday).**

Sd/-
Director
CRC-K

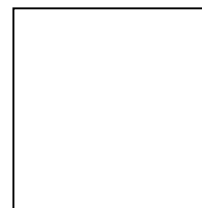
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Department of Empowerment of Persons with Disabilities (Divyangjan)
Ministry of Social Justice & Empowerment, Government of India
CRC Campus, Golf Link Road, Chevayur PO, Kozhikode, Kerala – 673 017

Engagement Notification No. 12/2024-25/DISLI/CRC-K/NIEPMD

Application form for Contractual Posts (Consultants)

Post Applied For:



- Name of Applicant:
(in full Block Letters):
- Date of Birth:
(Enclose Copy of Certificate)
D D M M Y E A R Age
- Citizenship Status: Citizen of India By Birth By Domicile
(Please Tick)
- Aadhaar No:
- RCI/MCI Registration No:
(Applicable in case of Faculty & Technical Positions)
- Name of Father/Spouse:
- Nationality: Indian Foreign NRI
- Gender: Male Female others
- Category : SC ST OBC General Ex-Service man
(Attach certificate)
- Are you Persons with Disability: Yes No OH VI HI others
(If yes, mention the category of Disability with relevant Certificate)
- Address for Communication:
House No & Street Name
Village/City:
District:
Post Office:

State:

Pin-code:

Phone No (Land Line):

Mobile No:

Email Id:

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	To	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 :

D D M M Y E A R

Signature of the Applicant