AYURVEDA TRIBAL HEALTH CARE RESEARCH PROJECT,

ATLANTA POINT PORT BLAIR-744104 (Under CCRAS, Ministry of AYUSH, Govt. of India)

ADVERTISEMENT NO. 03/2014-15

"WALK-IN INTERVIEW"

Walk-in-interview for the following post under the research projects entitled "Medico-Botanical Survey of A & N Islands (Selected Areas)" and "Tribal Health Care Survey Research Project (Covering Andaman and Nicobar State)" will be held on 06/03/2015 at 10.00 a.m. in the Office of the Research Officer In-charge, Ayurveda Tribal Health Care Research Project, Qtr No. Type – IV/AP – 111, Atlanta Point, Port Blair- 744104. The selection procedure will comprise of Written Test followed by Interview of candidates who qualify in the written test on the same day. The requirement and other details are as under:-

S. No.	Name of the Post	No. of Post	Qualification	Age Limit	Remuneration per month
1.	Senior Research	02	Essential :-BAMS	35	`.20, 000/-+
	Fellow (Ayu.)		Desirable: - MD/M.S. (Ayu.)	Years	HRA (20%)
			Computer Knowledge (MS		
			Office etc.)		

General Conditions:-

- 1. The eligibility of candidate in respect of age will be determined as on 01/01/2015. Relaxable in case of SC/ST/OBC as per Govt. Rules.
- 2. The engagement will be purely on contractual basis for six month and no claim for continuation or regular appointment will be entertained.
- 3. Applicant should bring their bio-data in the prescribed proforma along with the original certificates, experience certificate etc. with a set of photocopies and two recent passport size photographs.
- 4. The application format of Bio-data may be collected from the Office of the Research Officer In-Charge, ATHCRP, Qtr No. Type IV/AP 111, Atlanta Point, Port Blair or from the website of A & N Administration.
- 5. No TA/DA will be paid for attending the written test/interview.
- 6. Extension of tenure may be considered on need basis and performance of the incumbents.

-Sd-Research Officer In-Charge, ATHCRP

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S.No	Name & Address of the candidate with contact No.	Date of Birth	Educational qualification	% of Marks	Experience	Name of Organization	Remuneration	Publication if any,	Remar
Any o	ther information:								

Signature of the candidate Date:-____