संचिका संख्या / Project/21/2020/Estt. 688

भारत सरकार

केन्द्रीय मनश्चिकित्सा संस्थान कांके, राँची-834006 (झारखंड)

फोन : 91-0651-2451115 (Exch.)

-2451113 (0)

फैक्स : 91-0651-2450408, 2450823 ई-मेल : director@cipranchi.nic.in : www.cipranchi.nic.in

GOVERNMENT OF INDIA

CENTRAL INSTITUTE OF PSYCHIATRY

Kanke, Ranchi-834006 (Jharkhand) Phone: 91-0651-2451115 (Exch.)

91-0651-2451113 (0)

Fax: 91-0651-2450408, 2450823 E-mail: director@cipranchi.nic.in Web: www.cipranchi.nic.in

दिनांक / Date: .

NOTIFICATION

Applications are invited from the eligible candidates for filling up the following posts on a contract basis under the DBT Wellcome Trust India Alliance entitled "Clinical Research Centre for Neuromodulation in Psychiatry" at Central Institute of Psychiatry, Ranchi (Principal Investigators: Dr. Nishant Goyal and Dr. Umesh S., CIP, Ranchi)

SI. No.	Name of the Post	Junior Research Fellow/Staff Nurse				
1.	Number of Posts	2 (Two)				
	Essential Qualification for Eligibility	MPhil in Psychiatric Social Work from a recognized Institute/University OR M.Sc. (Psychiatric Nursing) OR M.Phil. (Clinical Psychology)				
1	Desirable Qualification for Eligibility	Previous experience working in projects related to Public Health OR Clinical Neurosciences OR Neuromodulation				
	Salary	31,000 INR + 18% HRA (wherever admissible)				
	Duration of the post	Initial appointment will be made for a period of one year, which will be extendable depending upon the performance of the candidate every 12 months till 02 years 06 months (OR) till the end of the project whichever is earlier				

Eligible candidates fulfilling the criteria must apply by mandatorily sending following documents as a single PDF in the same order:

- 1. Application letter (It should mention the Notification No., Sl. No. & Name of the applied Post & Date)
- Checklist (Strictly in the attached format) 2.
- Resume (Strictly in the attached format: mandatory to include e-mail ID, Contact Number, Postal Address & Two Referees) 3.
- 4. Copy of certificate of the Age Proof
- Copies of certificates of Essential Academic Qualification(s)
- Copies of certificates of Experience(s) (Experience wherever applicable for "Essential qualification for eligibility" should be supported by a Letter of Recommendation from the

supervisor of the department/section in which the candidate has work experience or relevant publications in peer-reviewed journals)

7. Document(s) to support other desirable qualifications

All the above documents should be mandatorily sent as a single pdf document by email to director@cipranchi.nic.in and psynishant@gmail.com. Applications not following the above format and not having the above-mentioned documentswill not be considered.

The last date for receipt of applications along with the relevant documents is 14 days from the date ofnotification.

- No applications shall be entertained if it is incomplete/ received after the last date prescribed.
- The institute will not take responsibility for postal delay or e-mail failure (if any)
- In case if it is felt necessary, the Institute may not fill up any or all of the above posts and if so, noseparate intimation will be given to the candidates.
- The Candidates will be short-listed for interview on the basis of the evaluation of thesubmitted documents
- No separate intimation will be given to the ineligible candidates.
- The Candidates will be selected as per project guidelines.

Date of Interview	06.03.2023
Time	11:30 AM
Venue	Board Room, New Teaching Block, CIP, Ranchi

Director, CIP

CHECKLIST

(Please fill the application summary form alongside: https://forms.qle/dxkKZmKp2SZ1uaQV6)

Name of the Candidate:	
Notification Number:	
SI. No of the post applied:	
Name of the Post applied:	

SI. No.	Item		Yes/No ("Yes" only if relevant document is attached)	Attachment Serial No.	
1.	Application Letter				
2.	Checklist				
3.	Resume				
4.	Age Proof				
_		a.			
5.	Essential qualification(s)	b.			
		c.			
		d.			
		e.			
		f.			
	Desirable	a.			
6.	qualification(s)	b.			
7.	Any other relevant document	a.			

I hereby declare that the I have all the requisite qualifications as mentioned in the notification. I have attached the requisite documents in the prescribed order. I declare that all the information provided in the application are correct and attached documents are the unaltered true copies of the original documents.

Signature of Candidate (with Full name and date)

1.	Name of the candidate						Affix your recent
2.	Present address	•					passport size
3.	Permanent address	:					photograph
4.	Email						
5.	Telephone number(s)						
6.	Age						
7.	Date of Birth	•					
8.	Academic qualifications	s		*)			
Na	ame of examination/	University/ Ins	stitution	Sub	ject		nth & Year of ompletion
-							
9.	Experience (previous a	ppointments held	with date a	and duratio	on):		
				and duracio			
	Post held		iod Te			period	Organization /Institute
	Post held	Per	iod			period	
	Post held	Per	iod			period	
	Post held	Per	iod			period	
	Post held	Per	iod			period	
10.	Post held Names and contact of Referees: (a)	Per From	iod			period	
	Names and contact of	Per From	iod			period	
	Names and contact of Referees: (a)	From details of two	iod			period	
10.	Names and contact of Referees: (a)	From details of two	iod			period	
10.	Names and contact of Referees: (a) (b) Any other relevant information	From details of two	iod			period	
10. 11.	Names and contact of Referees: (a) (b) Any other relevant infor	From details of two	iod				/Institute
10. 11.	Names and contact of Referees: (a) (b) Any other relevant information	From details of two	iod				

Format for Resume