#### NORTH EASTERN INSTITUTE OF AYURVEDA & HOMOEOPATHY

(An Autonomous Institute under the Ministry of AYUSH, Govt. of India) Mawdiangdiang, Shillong, Meghalaya – 793018

### Advt. No. NEIAH/ADVT/2023/1620

North Eastern Institute of Ayurveda & Homoeopathy (NEIAH), an Autonomous institute located at Mawdiangdiang, Shillong, under the Ministry of Ayush, Govt. of India, propose to engage the services of the following personnel purely on **contract basis** which may be curtailed at any point or extended by the competent authority.

Sl. No	Name of the Post	No. of the Post	Essential Qualification and Experience	Age (as on the date of interview
1	Medical Officer (Ayurveda):	01 (One)	MD / MS (Ayurveda) passed from a recognized Ayurvedic Institute/ University.	Up to 50 years
2	Hindi Translator cum Hindi Typist	01 (One)	<ol> <li>Bachelor's degree in Hindi with English as elective subject at the degree level or Bachjelor's degree of a recognized University in English with Hindi as an elective subject.</li> <li>A Typing speed (35 WPM corresponding word to 10500 KDPH)</li> <li>Desirabble Experience:         Three years post qualification experience in the relevant field.     </li> </ol>	Up to 45 years

**Note:** The selection will be made through **Walk in Interview** scheduled to be held **on 12.10.2023** at Office of the Director, NEIAH, Mawdiangdiang, Shillong Meghalaya-793018 (Near NEIGRIHMS Police Out Post) Candidates should bring duly fill up application form in prescribe format, two passport size photographs and original certificates along with photocopy of the same duly self-attested in support of their Age, Qualifications, Registration & Experiences etc. No TA/DA will be admissible to appear in the interview. Institute reserves the right to make any amendment to or cancellation of this advertisement completely or partially without assigning any reason thereof.

Sd/-NEIAH, Shillong

Dated: 25.09.2023

### NORTH EASTERN INSTITUTE OF AYURVEDA AND HOMOEPATHY (NEIAH)

# (AN AUTONOMOUS INSTITUTE UNDER THE MINISTRY OF AYUSH) GOVERNEMNT OF INDIA MAWDIANGDIANG, SHILLONG, MEGHLAYA-793018

### **APPLICATION FORM**

Name of the j (with discipli Sl. No of the	ne)			Affix self attested
Advertisemen	t No. :			recent passport size photograph
1. Name in				
•	ITAL letters)			
	s/Husband's Name: : (in CAPITAL letters)			
3. Address (i)		correspondence, with p	hone/mobile No. & E-	-mail)-
				No:
(ii)	Permanent Home ad	ldress -		
	birth: dd mm		_	
	of Birth in words:as on date of interview)			
5. Nationali	ty :	6.	Sex: Male /Fe	emale
` ′	er Tongue :	Mark below as applica	able (√)	
Language	Read	Write	Speak	
English Hindi				_

(Add other languages, if any)

## 7. Qualification (Academic & Professional) (Please enclose a Xerox copy of each degree/certificate & mark- sheet):

Examination	Name of the Degree/Diploma	Name of the College & University and Board	Year of passing	Division obtained (mention distinction if any	Percentage of marks/OGPA obtained (Aggregate in case of degree programme)	Subject(s) (Major)/ Specialization
10 <sup>th</sup> or equivalent						
(10+2) or equivalent						
Degree/ Diploma course						
Master Degree						
PhD						
Any other examination(s)						

### 08. Details of Professional Publications and Research Work:

(Please attach details on separate sheet duly signed to include Topic / Name of Publication, Name of Journal (ISSN) / Publisher & Edition etc)

9.	Employment/Ex	periences Red	cord (Starting	from the	present	position)	:

Office/Institute/ Organization	Post held	Pay	From	То	Actual Duration (Years & Months)	Nature of Duties
10. Training/Cour			Institutio	n e		— Duration
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11. Registration						
Name of State 12. Additional de	te/ Central Boar tails about your					
	e whether work		-	ne)-		
i. Central G	overnment					
	ernment					
	ous Organization					
	ate Government					
v. Central/S	tate University_					
vi Private (	Organization					

(Enclose a separate sheet, if the space is insufficient in any column.)				
DECLARATION				
affirm that information given in this application is true and correct. I also fully understand that if at any tage it is discovered that any attempt has been made by me to willfully conceal or misrepresent any facts my candidature may be summarily rejected or employment terminated.				
Signature of the candidate				
Place:				
Date:				
(Name in CAPITAL letters)				

13. Additional information, if any, which you would like to support of your suitability for the post.