आरोग्यम् सुखसम्पदा

THE NATIONAL INSTITUTE OF HEALTH & FAMILY WELFARE

Baba Gang Nath Marg, Munirka, New Delhi-110067

No.C.12030/3/2022-Admn.II

Date: 21/07/2022

VACANCY NOTICE

The National Institute of Health and Family Welfare (NIHFW) is an Autonomous / Apex Technical Institute funded by the Ministry of Health and Family Welfare for promoting Health and Family Welfare Programme in the country through Education & Training, Research & Evaluation, specialized services, consultancy and advisory service.

The following post need to be filled on contractual basis in Department of Reproductive Bio-Medicine in NIHFW. The duration of the appointment will be initially for a period of one year. The contract may be curtailed or extended based on requirement and performance during the period:-

S.No.	Name of the post	No. of Post	Consolidated monthly remuneration in Rs.				
1.	Veterinarian	1	Rs. 2500/- per day (for the days of working) , subject to maximum consolidated pay of Rs.50,000/- per month				

Name of the Post: Veterinarian (1 Post)

Consolidated salary: Rs. 2500/- per day (for the days of working) subject to maximum

consolidated pay of Rs. 50,000/- per month.

Age limit: Not exceeding 62 years

Essential Qualifications: B.V.Sc.

Experience: 3 years of experience of maintaining experimental

Laboratory Animals, including primates.

Job responsibilities: Up keeping of Animal House.

Mode of Selection: Through Interview.

The applications should reach NIHFW latest by 22/08/2022 upto 5.00 p.m.

Duration: Appointment will be initially for a period of One year. The contract may be renewed based on requirement and performance during the period.

Place of Duty: NIHFW, New Delhi.

General Instructions:

- Interested candidates may send their application in the prescribed format latest by **22/08/2022 upto 5.00 p.m.** to the Deputy Director (Admn.), The National Institute of Health & Family Welfare, Baba Gang Nath Marg, Munirka, NewDelhi-110067.
- Candidates working in Central Govt./State Govt./Autonomous Bodies/Universities/PSUs are requested to apply through proper channel.
- Applications must be submitted in the attached format only.
- Applications must be duly supported by self attested documents related to age, educational qualifications and experience etc.
- The candidates are required to submit their application with a subject "Application for the post of "______".
- Applications received in the format other than as attached and without supported documents will not be considered and shall be rejected summarily.
- The candidature of finally selected candidate's will be provisional and subject to verification of original documents.
- The NIHFW reserves the right to either fill up the post, or not, without assigning any reason.
- The application and self-attested copies of certificates so submitted at the time of verification will not be returned to candidates.
- Candidates must ensure that he/she fulfils the requisite essential qualifications, experience and age etc. on the date of submission of filled application form.
- Without original certificates, the candidates will not be considered for appointment. In all cases the decision of this Institute shall be treated as final.
- Canvassing of any form will render candidate as disqualified.

DIRECTOR (Addl. Charge)



The National Institute of Health & Family Welfare Baba Gang Nath Marg, Munirka, New Delhi-110067

Recent Pass port size colour photo

1.	Name of the position	on applied for	:				
2.	Name of the candida	te in full	:				(Hindi)
							(English)
3.	Father's Name		:				
4.	(a) Address for corre	spondence	:				
	(b) Mobile /phone No						
	(b) Mobile /priorie No	<i>)</i> .	•				
	(c) Email address		:				
5.	Permanent Address		:				
6.	Date of birth and pres	sent age	:				
7.	Whether belongs to \$ /EWS/PWD (Please		:	(As	s on date of into	erview)	
8.	Educational Qualifica	ations:					
Sr.		Board /	Year of		Max. Marks	Marks	Percentage
No.		University	passing			obtained	(%)

9.	Details of e	employment:						
Post held				From	То	Nature of duties performed		
10.	In case of	Pensioner:						
Name of the Organization with full address		Post held		e of Pay / PB Grade Pay	Amount of Pension	Basic	Remarks	
11.	Any other	relevant information):					
12.		ik the self-attested c on, experience, Date				of your e	ducational	
13.	13. List of enclosures (i) (ii) (iii)							
	(iv) (v)			(vi)				
14.	and in cas	ke that the informationse of any suppressions of with immediate eff	n of ir	•				
						Signatu	re of the applicant	
Date:					Nam	e:		