INDIAN COUNCIL OF MEDICAL RESEARCH
Ref. Adv.ICMRHQ/ADMN.I/2016/05

VACANCY CIRCULAR

Indian Council of Medical Research (ICMR), an autonomous organization under the Department of Health Research Ministry of Health & Family Welfare, Government of India invites applications for filling up one post of Information Interface Officer in Pay Band-3 (Rs.15600-39000) with Grade Pay of Rs. 5400/- on deputation basis for a period of three years at its Hqrs. Office, New Delhi. Eligibility condition & experience for the post are as under:

Eligibility criteria & Experience:
Holding analogous post in the Grade Pay of Rs.5400/- on regular basis and having working experience related to Public Relations/Publicity in Central Information Services (CIS)/Indian Information Services (IIS) cadre/Doordarshan/AIR OR Candidates in Pay Band-2 (Rs.9300-34800) with Grade Pay Rs. 4600/- with 05 years experience related to Public Relation/Publicity in Central Information Service (CIS) Doordarshan/AIR /Indian Information Services (IIS) Cadre.

2. Willing and eligible officers may submit their application in the prescribed form (available at ICMR Website http://www.icmr.nic.in) along with detailed CV (giving the details of past assignments and the work handled by the Officer) through proper channel, so as to reach to Assistant Director General (Administration-I), Indian Council of Medical Research, V. Ramalingaswamy Bhawan, Ansari Nagar, Post Box-4911, New Delhi – 110029 on or before 18.07.2016.

3. While forwarding the applications, the concerned Organization/Department/Office should also send the following documents:
   a) Vigilance Clearance Certificate

4. Maximum age limit is 56 years as on the last date of receipt of application. The application received after the last date of application/incomplete will not be considered.

5. The selected candidate will be appointed on deputation basis for a period of three years, which may be curtailed or extended further (upto five years) in the interest of ICMR with the approval of the Competent Authority. The pay and other terms & conditions of deputation will be governed as per the instructions of the Department of Personnel & Training (DoPT) issued from time to time in this regard.

Asstt. Director General ( Admn.)
Tel.No: 011-26589694
# FORM OF APPLICATION FOR THE POST OF INFORMATION INTERFACE OFFICER

To be filled by the Applicant  (No column should be left blank)

1. **Full name of the applicant (in block letters):**

2. **Father's name/Spouse name**

3. **Gender:**
   - Male
   - Female

4. (a) **Date of Birth**
   - DD
   - MM
   - YYYY

   (b) **Age as on last date for receipt of application:**
   - DD
   - MM
   - YYYY

   (c) **Date of Retirement**
   - DD
   - MM
   - YYYY

5. (a) **Name of the Service**

   (b) **Date of joining in Service**
   - DD
   - MM
   - YYYY

6. **Details of posting in last 10 years, starting with present post held:**
   (Use additional sheet if required)

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Designation</th>
<th>Name of Organisation/Department/Office</th>
<th>Whether post held on regular/adhoc/officiating/deputation basis</th>
<th>Scale of Pay/Pay Band + Grade Pay</th>
<th>Period From</th>
<th>Period To</th>
<th>Duration</th>
</tr>
</thead>
</table>

7. **Current post held on regular basis**
   (a) **Name of the post**
   - 

   (b) **Whether Group A/B Gazetted:**
   - Group-A
   - Group-B

   (c) **Scale of Pay/Pay/Band + Grade Pay**
   - 

   (d) **Date of appointment on regular basis in Group 'A' (Gazetted)/Group 'B' (Gazetted post)**
   - DD
   - MM
   - YYYY

8. **Present Basic Pay + Grade Pay**
   - Basic Pay
   - Grade Pay

9. (a) **Educational Qualifications**

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**INDIAN COUNCIL OF MEDICAL RESEARCH**

V. Ramalingaswami Bhawan, Ansari Nagar, New Delhi-110029
(b) Professional Qualifications, if any

10 Total experience, particularly relating to Health Sector/Research Organization

11 Date of return from last ex-cadre post, if any date of completion of cooling off period, if applicable

12 Whether all eligibility conditions are fulfilled:

13 (a) Postal address for communictin with Pin Code (in block letters)

   Telephone No.          Mobile No.
   Fax Number:
   E-mail ID

(b) Postal address of Parent Department with PIN Code and Telephone/Fax Number/E-mail ID (in block letters)

Certified that the information furnished above by me is correct

Part-II

(To be filled by the Cadre Controlling Authority of the applicant)

Office of ____________________________

1 Certified that the particulars given above by the applicant are correct as per the records available in the Department/Office of ____________________________

2 It is also certified that Shri/Ms ____________________________ is clear from Vigilance Angle and no disciplinary proceedings are pending or contemplated against him/her

3 It is also certified that integrity of Shri/Ms ____________________________ is

4 The attested copies of the Annual Confidential Reports (ACRs)/Annual Performance Appraisal Reports (APARs for the last 5 years, i.e. 2010-2011, 2011-2012, 2012-2013, 2013-2014 and 2014-2015 are enclosed along with NRC for the period ____________________________ (if ACE/APAR for period of more than 3 months is not available/recorded then ACRs/APARs prior to 2010-2011 for the matching period needed to be forwarded along with No Report Certificate (NRC).

5 It is hereby certified further that this Department/Office shall have no objection to the relieving of said officer in case Shri/Ms ____________________________ is selected for the post of Senior Financial Advisor in ICMR.

Place:
Date:

(Name, Signature & Telephone No. of officer with official Stamp)