

Employment News 4 - 10 December, 2021



सत्यमेव जयते

Rehabilitation Council of India

(A Statutory Body of Ministry of Social Justice & Empowerment)
Department of Empowerment of Persons with Disabilities (Divyangjan)
B-22, Qutab Institutional Area, New Delhi-110016
Tel.: 011-26534287, 26532408. Fax: 011-26534297. Email: rci-depwd@gov.in



भारतीय पुनर्वास परिषद्

Advertisement No.: 02/2021

Appointment of Member Secretary, Rehabilitation Council of India, New Delhi (On Deputation)

Applications are invited for the post of MEMBER SECRETARY, Rehabilitation Council of India (a statutory body under the administrative control of Department of Empowerment of Persons with Disabilities, Ministry of Social Justice & Empowerment, GoI), New Delhi on deputation basis as per the details given below:

1. **Name of the post:** Member Secretary - Group 'A', Ministerial
2. **Method of Recruitment:** On deputation
3. **Number of vacancy:** 01 (One)
4. **Scale of Pay :** PB- 4, Rs.37400-67000 + Grade Pay Rs.8700/- (Level – 13, 7th CPC, Rs.123100-215900)
5. **Eligibility Criteria:** Officers under Central/State Government/ Universities/ Recognised Research Institutes/Public Sector Undertaking/Semi-Government/ Autonomous/Statutory Organisation, holding:
 - (a) (i) Analogous posts on regular basis, OR
(ii) Posts in PB-3, Rs.15600-39100 plus Grade Pay Rs.7600 (Level – 12, 7th CPC) with five years regular service in the grade, OR
(iii) Posts in PB-3, Rs.15600-39100 plus Grade Pay Rs.6600 (Level – 11, 7th CPC) with eight years regular service in the grade.
 - (b) Possessing the following qualification:
 - (i) Master's Degree from a recognized University or its equivalent
 - (ii) Ten years experience in responsible administrative capacity and in the field of rehabilitation of disabled.

GENERAL CONDITIONS:

1. Period of deputation including period of deputation in another ex-cadre post held immediately preceding this appointment in the same or some other organization or department shall not ordinarily exceed three years. The maximum age limit for deputation shall not be exceeding 56 years as on the closing date of receipt of applications.
2. The applications in the prescribed format complete in all respects, accompanied by self-attested copies of testimonials/certificates, along with last five years ACRs/APARs, Integrity Certificate and Vigilance Clearance should reach only through proper channel to **The Member Secretary, Rehabilitation Council of India, B-22, Qutab Institutional Area, New Delhi-110 016** within 60 days from the date of publication of this advertisement in **Employment News/Rozgar Samachar**. The applications received not through proper channel by the last date shall not be entertained in any manner. For further details and application format, please visit the Council's website www.rehabcouncil.nic.in.

Member Secretary

REHABILITATION COUNCIL OF INDIA

Format of Application (For Deputation)		Affix latest Passport Size Photograph duly self attested
Post Applied for		
Advertisement Number		

1. Name and Address (in Block Letter) :
with Tel./Mob.Number & E-mail ID

2. Father's Name :

3. Date of Birth (in Christian Era) :

4. Date of retirement (where applicable) :
under Central/ State Govt. Rules)

5. Educational Qualification :

6. Whether educational and other qualifications required for the post are satisfied (if any qualification has been treated as equivalent to the one prescribed in the Rules, state the authority for the same)

		Qualifications/Experience required	Qualifications/Experience Possessed by the Applicant
Essential	1		
	2		
	3		
Desired	1		
	2		

7. Please state clearly whether in the light of entries made by you above, you meet the requirements of the post: Yes/No

REHABILITATION COUNCIL OF INDIA

: 2 :

8.Details of Employment, in chronological order starting with the latest. Enclose a separate sheet duly authenticated by your signature, if the space below is insufficient.

Organization	Post held/ Designation	From	To	Scale of Pay with GP/Pay Matrix and the Basic Pay	Nature of duties (in details)

9.Nature of present employment i.e. Ad-hoc or Temporary or Permanent:

10.In case the present employment is held on deputation/ contract basis, please state-

- (a) The date of initial appointment
- (b) Period of appointment on deputation/ contract.
- (c) Name of the parent office/organization to which you belong

11. Additional details about present employment. Please state whether working under (indicate the name of your employer against the relevant column)-

- (a) Central Govt.
- (b) State Govt.
- (c) Autonomous Organization
- (d) Government Undertaking
- (e) Universities
- (f) Others

12.Please state whether you are working in the same department and are in the feeder grade or feeder to feeder grade.

13. Are you in Revised Scale of Pay? If yes, give the date from which the revision took place and also indicate the pre-revised scale.

14. Total emoluments per month now drawn.

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

16. Whether belong to SC/ST/ OBC/.PwD (OH, B, LV, HI)

17.Remarks [The candidates may indicate information with regard to (i) Research publication and reports and special projects (ii) Awards/ Scholarship/ Official Appreciation (iii) Affiliation with the professionals bodies/ institutions/ Societies and (iv) any other information.]
(Note: Enclose a separate sheet if the space is insufficient).

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: 3 :

I have carefully gone through the Vacancy circular/advertisement and I am well aware that the information furnished in the curriculum Vitae duly supported by documents in respect of Essential Qualification/Work Experience submitted by me will also be assessed by the Selection Committee at the time of selection for the post. The information/details provided by me are correct and true to the best of my knowledge and no material fact having a bearing on my selection has been suppressed/withheld.

(Signature of the candidate)

Date -----

Address

.....

COUNTERSIGNED

(Employer with seal)

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: 4:

CERTIFICATE TO BE FURNISHED BY THE EMPLOYER/FORWARDING AUTHORITY

It is also certified that there is no Criminal/Vigilance/Disciplinary case either pending or being contemplated against Shri/Smt/Kum _____, presently working with this Dept/Organization as _____ since _____.

2.His/her integrity is certified as beyond doubt.

3.No major or minor penalty has been imposed on Shri/Smt./Kum. _____ during the last 10 years.

4.The attested copies of the ACRs/APARs for the last 5 years are enclosed.

Place:

Countersigned

Dates:

(Employer with seal)