

ALL INDIA INSTITUTE OF MEDICAL SCIENCES Ansari Nagar, New Delhi-110 608

Applications are invited in the prescribed proforma from suitable officers for filling up **02 posts of Senior Administrative Officer on Deputation Basis** in the Pay Band-3 of Rs.15600-39100 + Grade Pay of Rs.6600 in All India Institute of Medical Sciences, Ansari Nagar, New Delhi-110608.

The qualification and experiences etc. attached to the post of Senior Administrative Officer are as under:-

Essential

Officers under the Central/State Governments/U.T. Administrations or the Central Statutory/ Autonomous Bodies holding analogous posts on regular basis <u>or</u> with at least 5/8 years of regular service in a post in the Pay Band-3 of Rs.15600-39100 + Grade Pay of Rs.5400/Pay Band-2 of Rs.9300-34800 + Grade Pay of Rs.4600 respectively or equivalent and having a Degree and experience in administration and establishment matters and also preferably in accounts matters. Officers having MBA or Post Graduate Diploma in Personnel Management shall be given preference. (Period of deputation shall not ordinarily exceed 3 years.)

Upper age limit: 56 years

The Officers who fulfil the above qualifications/eligibility may submit their application in the prescribed proforma at Annexure-I through proper channel to the Director, All India Institute of Medical Sciences, Ansari Nagar, New Delhi-110029, so as to reach the addressee by 18-08-2012. The envelop containing the application(s) should be superscribed "Application for the Post of Senior Administrative Officer on Deputation basis." While forwarding their applications, it may be ensured that the particulars of the candidates are verified and that they fulfill the eligibility conditions. Duly attested photocopies of their up to date Confidential Reports (at least for the latest 05 years) may also be enclosed with the applications. It may also be clearly stated that no vigilance/disciplinary proceedings is pending or contemplated against the candidates concerned. Applications without vigilance clearance and CR Dossiers will not be considered.

The deputation will be governed by the standard terms and conditions of deputation provided under Department of Personnel & Training's O.M.No.6/8/2009-Estt.(Pay II) dated 17.06.2010, as amended from time to time.

ADMINISTRATIVE OFFICER (RECTT.)

Application for the post of ______ at AllMS on deputation basis

1	Name and address in BLC						
2	Date of birth (in Christian e	era)					
3	Date of retirement under Central/State Government Rules						
4	Educational Qualification:						
5	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).						
				ns / Experience		11 11 66	
	Essential		Required		Possessed by the officer		
	Loodiiliai						
	Desirable						
6	Please state clearly wheth made by you above, you of the post.				I		
7		etails of employments (in chronological order) enclose a separate sheet, duly authenticated by your gnature if the space below is insufficient.					
	Office/Instt./Organization		Held	•	nd Grade Pay	Nature of Duties	
		From	То	•	ay if in pre- ale of pay)		
					1 7/		
0	Notice of propert applican	nant/iaadh	00.00				
8	Nature of present employr temporary or quasi-perma	•					
9	In case the present er		,				
	deputation/contract basis,						
	(a) the date of initial a						
	(b) period of deputation/contra	appointme	ent on				
	(c) name of the pare		anization to				
	which you belong		aa				
10	Additional details about present employment						
	please state whether work						
	(a) Central Governmer(b) State Government	IL					
	(c) Autonomous Organ	nization					
	(d) Government under						
	(e) University						

11	Are you in revised scale of pay? If yes, give the date from which the revision took place and also indicate the prerevised scale.			
12	Total emoluments per month now drawn.			
13	Additional information, if any which you would like to mention in support of your suitability for the post. Enclose a separate sheet, if the space is insufficient.			
14	Whether belongs to SC/ST/OBC (if yes, please specify):			
15.	Contact Nos. :- 1) Office 2) Residence 3) Mobile 4) e-mail address			
Date :	:	Signature of the candidate :		
Countersigned : (Employer/Authorized Officer)		Address :		