Board of Homoeopathic System of Medicine, Delhi (Govt. of NCT of Delhi) 4th Floor, B-Wing, Vikas Bhawan-II, Civil Lines, Delhi-110054

Application Form for Appointment of Registrar on Contract Basis

Board of Homoeopathic System of Medicine is a statutory body of Govt. of NCT of Delhi under Directorate of AYUSH. It propose to appoint one Registrar on contract basis initially for a period of one year which may be extended on the basis of work requirement and performance. Interested candidates having the prescribed eligibility parameter may give application with in a week of publish in news paper at office of the Chairman of this Board at above mentioned address. The details are as under:-

SI.	Name of	No. of	Eligibility	Monthly	Type of
No	the Post	Posts		Remuneration	Work
		to be			
		filled			
1.	Registrar	One	Essential Qualification:	55,000/-	Keep the
			i) MD(Homoeopathy)		register and
			Experience:		discharge
			ii) Candidate must have		such other
			at least 5 years as		functions,
			consultant or in		the register
			administrative		correct and
			capacity in		up to date
			Central/State		and may
			Government/Autonom		from time to
			ous organization		time enter,
			Desirable:		entries in
			iii) Knowledge of		respect of
			Computer Operation		additional
					qualification

Other terms and condition for appointment

- 1. The Registrar will entitled to avail 01 day casual leave in each month. Beyond this limit deduction in remuneration will be made on pro-rata basis.
- 2. The Consultant shall not be allowed to accept work of any work of any other organization firm during the period of contract.
- 3. If she/he is deployed outside the office, she /he will be entitled to travel in 3rd AC train.
- 4. In case of resignation, one month notice is required.

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1.	Name	(In Capita	al letter):						_		
2.	Father/Husband Name:									Paste here a self	
3.	Date of Birth:									attested recent passport size	
4.	Permanent Address:									photo	
5.	Corres	pondence	e Address:								
	Email ID: Contact No:										
					'						
6.	6. Academic/Technical/Professional qualification										
	Sr. Qualification No. Examination		Subject		Secured Marks(%)		Board/University				
7	Experi	ence (If a	nv)-								
[Name			of	Working P	eri	od	Salar	y	Nature of	
	Organi & Add		Post			T				Work	
-	& Add	iress			From	To)				
8	State F	Roard/Stat	te Council/C	CF	I Registratio	n I	No				
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11	.Any of	ther releva	ant informati		-		••••	• • • • • • • •		· ···	
				<u>D</u>	eclaration eclaration						
I have carefully gone through the vacancy circular advertisement and I am well aware that the application duly supported by documents submitted by me. Date:											
Place	:							Sic	notize	ra of annligant	
								Sig	matul	re of applicant	

N.B.: Please note that self attested copies of certificate regarding Education Qualification. Experience and Registration Certificate are attached with the application.