



ಅಖಿಲ ಭಾರತ ವಾಕ್ ಶ್ರವಣ ಸಂಸ್ಥೆ-೫೭೦೦೦೬

अखिलभारतीय वाक् श्रवणसंस्थान :मैसूरु - 570006

ALL INDIA INSTITUTE OF SPEECH & HEARING: MYSORE – 570006

An Autonomous body under the Ministry of Health and Family Welfare,

Govt. of India, Manasagangothri, Mysore – 570 006

Phone: 0821-2502000/ 2502100, www.aiishmysore.in

ವಿಜ್ಞಾಪನಸಂಖ್ಯಾ / **ADVERTISEMENT No. 05/2023**

ದಿನಾಂಕ/Dated: **June 01, 2023**

AIISH, Mysore invites applications for the following post to be filled **on contract basis** at various departments of AIISH, Mysore & DHLS / OSC Centre's of AIISH as detailed below:

Post code.	Name of the Post	Place of postings (AIISH / DHLS / NBS/ OSC / Centre's of AIISH)	No of Posts	Age (Upper Age Limit)	Consolidated salary & Tenure of contractual appointment
01	Audiologist Grade I	AIISH, Mysore	03	Up to 30 years	Rs.39,000/- per month and no other allowances are admissible for a period of 12 months.
02	Speech Language Pathologist Gr. I	AIISH, Mysore	03		
03	Audiologist Grade I	DHLS - AIISH, Mysore	01		
04	Speech Language Pathologist Gr. I	DHLS - AIISH, Mysore	01		
05	Audiologist Grade I	DHLS - AIIPMR, Mumbai	01		
06	Speech Language Pathologist Gr. I	DHLS - JLNMC, Bhagalpur	01		
07	Speech Language Pathologist Gr. I	DHLS - RIMS, Ranchi	01		
08	Audiologist / SLP Gr. I	DHLS - SCBMC, Cuttack	01		
09	Speech Language Pathologist Gr. I	OSC - AIIMS, Bhopal	01		
10	Speech Language Pathologist Gr. I	OSC - KIIMS, Kodagu	01		
11	Speech Language Pathologist Gr. I	OSC - GIMS, Noida	01		
12	Speech Language Pathologist Gr. I	OSC - GIMS, Kalaburgi	01		
13	Speech Language Pathologist Gr. I	OSC - SDH, Kundapura	01		
14	Speech Language Pathologist Gr. I	OSC - GMCH, Ambikapur	01		
15	Speech Language Pathologist Gr. I	OSC - GMC, Bhopal	01		
16	Audiologist Grade II	AIISH, Mysore	01	Up to 30 years	Rs.32,000/- per month and no other allowances are admissible for a period of 12 months.
17	Speech Language Pathologist Gr. II	AIISH, Mysore	04		

For the post code 1 to 15: Essential Qualification for the post of **Audiologist / Speech Language Pathologist Grade I** is **M.Sc. in Speech and Hearing / M.Sc. Speech-Language Pathology / Audiology or its equivalent.**

For the post code 16 to 17: Essential Qualification for the post of **Audiologist / Speech Language Pathologist Grade II** is **B.Sc. in Speech and Hearing / B.Sc. Speech-Language Pathology / Audiology or its equivalent.**

GENERAL CONDITIONS / INFORMATION:

- 1 The filling up of the above posts shall be on need basis and **purely temporary**.
- 2 ***The engagement of the candidates in these posts does not confer any right or title to claim a permanent appointment at this Institute.***
- 3 All the details furnished in the offline application will be treated as final and no changes shall be entertained.
- 4 Applications without **photograph, signature, and necessary certificates in support of their application shall be summarily rejected**.
- 5 The qualifications prescribed should have been obtained through recognized Universities/ Institutions.
- 6 The prescribed Essential Qualifications are a bare minimum and mere possession of it, will not entitle the candidates to be considered for the post. The candidates should furnish all the Qualifications and Experience possessed in the relevant field, over and above the minimum qualifications prescribed for consideration of their candidature. **Rehabilitation professionals shall hold a valid registration with RCI (for the post code 01 to 17 is must otherwise your candidature will be summarily rejected & RCI Certificate is in case of renewal stage: candidates must produce acknowledgement letter along with previous RCI certificate along with your application).**
- 7 The upper age limit will be reckoned as on the last date prescribed for receipt of applications.
- 8 **Candidates should mention postcode and name of the post in their application form with passport size photo affixed, proof for DOB, experience certificates and copies of education qualification, marks list, RCI certificate and other relevant certificates, Grade conversion-if applicable with self-attestation to be submitted wherever applicable. Otherwise, the application will be rejected.** Candidates should also **indicate the name of the post, postcode** in the application.
- 9 **The last date of receipt of applications is 12.06.2023 at 5.30 P.M.**
- 10 The appointment of the selected candidates is subject to being found medically fit as per the requirements of the Institute.
- 11 Candidates applying for more than one post should submit separate applications for each post codes indicating the name of the postcode and place of posting in each application applied for. Otherwise, the application will be summarily rejected.
- 12 The Applications received in response to the advertisement will be scrutinized and only shortlisted candidates will be considered for the further selection process.

- 13 **Mode of selection:** Written test or Personal Interaction shall be conducted if necessary and details will be notified in the AIISH website. Further, the eligible candidates will be informed of it in due course as per the recommendations of the Screening Committee. In this connection, for final selection process, the candidates will be shortlisted in accordance with the merit in the essential qualification.
- 14 **The competent authority reserves the right to accept or reject any application without assigning any reasons.**
- 15 **The competent authority reserves the right not to fill all or any of the posts mentioned in the advertisement.**
- 16 **Canvassing in any form and/or bringing in any influence political or otherwise will be treated as a disqualification for the post.**
- 17 Interim enquiries and other enquiries will not be attended to.
- 18 Candidates should regularly visit our website for www.aiishmysore.in for latest updates through notifications, instructions, and circulars relating to this recruitment process. No separate communication in this regard will be sent.

HOW TO APPLY:

- a) The application may be downloaded from our website www.aiishmysore.in.
- b) Interested candidates who meet the requirement, may **send their Applications** along with **Self attested copy** of necessary certificates in support of their **DOB proof, educational qualification certificates i.e., all semester marks list, Degree certificates, RCI certificates, experience certificates (if necessary) and other relevant certificates** to be submitted to Office of the Chief Administrative Officer, All India Institute of Speech and Hearing, Manasagangothri, Mysore-570006 **on or before 12.06.2023 at 5.30 PM.**
- c) Envelope should be super-scribed **“Application for the post of.....”, “Post Code.....”**
- d) **Application fee:**
For General Category, OBC and EWS candidates – ₹100/-
For candidates belonging to SC/ST categories - ₹40/- for
For women and PWD candidates - **exempted** from payment of application fee.
Copy of transaction receipt should be enclosed along with the application form.
Application without application fee will be summarily rejected.
- e) Applications received after the last date or with insufficient information would not be considered.

f) Method of payment of application fee: 1. BHIM QR CODE

 <p>Merchant Name : AIISH</p>  <p>Payee VPA : aiishmysore@barodampay</p> 	<p style="text-align: center;">← Scan & Pay</p> <p style="background-color: #e0e0e0; padding: 5px;">Sending money to</p> <p style="background-color: #e0e0e0; padding: 5px;">  AIISH Mysuru  aiishmysore@barodampay </p> <p>Amount Min ₹1</p> <p style="border: 1px solid #ccc; padding: 2px;">₹ 00.00</p> <p>Debit account</p> <p style="border: 1px solid #ccc; padding: 2px;">XXXXXX3667</p> <p>Remarks (Optional)</p> <p style="border: 1px solid #ccc; padding: 2px;">Application fee for the post of.....</p> <p>★ Add to favourites</p> <p style="text-align: center;"> Back Confirm </p>
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2. Payment thro' NEFT:

1.	BENEFICIARY NAME & POSTAL ADDRESS	DIRECTOR ALL INDIA INSTITUTE OF SPEECH & HEARING, MANASAGANGOTHRI, MYSORE 570 006
2.	NAME OF THE BANK	BANK OF BARODA
	BRANCH NAME WITH COMPLETE ADDRESS	AIISH BRANCH, NAIMISHAM CAMPUS MANASAGANGOTHRI, MYSORE KARNATAKA - 570 006
	BRANCH CODE No.	9832
3.	IFSC CODE OF THE BRANCH	BARBoEXTMYS [BARB(ZERO)EXTMYS]
4.	ACCOUNT NUMBER	98320100000664
5.	TYPE OF BANK ACCOUNT (SB/CURRENT)	SAVINGS BANK ACCOUNT

The candidates should mention the prescribed application fee details in the Application also (Transaction ID/ UTR reference no. and date of payment).

Please mention in the Remarks / Purpose of the transaction as:

➡ Application fee for the post of

➡ Application fee for the post code.....

Candidate has to provide the following details of the payment in the application form and **attach proof of payment in the application:**

Transaction ID/ UTR reference no:

Date of Payment:

Sd.xxx
DIRECTOR

Advt. No. 05/2023 dated: 01.06.2023

Advertisement No: 05/2023 dt.01.06.2023

Closing date: 12.06.2023



Transaction ID/UTR

Date of payment:

Amount Paid:

Photo

ALL INDIA INSTITUTE OF SPEECH AND HEARING, MYSORE - 570 006

(An Autonomous Body under Ministry of Health & Family Welfare, Govt of India)

APPLICATION FOR THE POST OF POST Code.....

Place of posting applied for:.....

1. Name of the Candidate (BLOCK LETTERS)
Mr / Mrs / Ms / Dr.

2. Gender:

Male

Female

Transgender

3. (a) Address for Communication

.....
.....
.....

(b) Email ID

(c) Mobile Number

(d) Aadhar No.

(e) Permanent Address

.....
.....
.....

4. (a) Date of Birth

DD

MM

YYYY

(b) Age as on last date of Application

YEARS

Months

DATE

(c) Place of Birth

.....

5. Are you:

(a) a citizen of India by birth and / or by domicile?

.....

(b) If not, indicate the Nationality

.....

6. Name the state to which you belong

.....

7. (a) Father's Name

.....

(b) Father's Occupation

Govt.

Private

others

8. State whether you are a member of Scheduled

Caste / Scheduled Tribe / OBC / EWS / UR / PWD

(if so, please produce an attested copy in support)

SC

ST

OBC

UR

EWS

PWD

9. Academic Qualification:

(Note: Percentage should be calculated strictly in accordance with the Rules & Regulations of the respective university / board (as awarded in Degree Certificate & the copy of percentage conversion certificate received from university/college should be attached alongwith the application).

Examination (Name of the Board/University)	Percentage of marks obtained	CGPA	Major Subjects	Year of passing	Class
SSLC / X					
HSC / XII					
Diploma					
Bachelor Degree					
Master Degree					
Ph.D					

10. Are you Involved in any court cases

yes

NO

11. Have you been outside India? If so, give the following particulars:							
Country		Date of visit		Duration of visit		Purpose of visit	
12. Particulars of Passport							
No.		Issuing Authority			Valid upto		
13. Research publications: (List them in a separate sheet referring to this serial number):							
14. Research Projects completed / ongoing with you as an investigator: (Give these particulars in a separate sheet quoting this serial number) (a) Title (b) Source of Funds (c) Duration (d) Status							
15. Awards / Honors received							
16. Membership of professional organizations							
17. Language known (read and / or speak):							
18. Work experience (starting from the most recent): (Note: if the copy of experience certificate is not enclosed then, it will be assumed that your experience will not be counted for further correspondences in connection with this advertisement)							
Name of the employer	Position	Duration		Copy enclosed		Duties	Remuneration / salary paid
		From	To	Yes	NO		

19. Are you willing to accept the minimum initial pay offered ? If not, state what is the lowest initial pay that you would accept in the prescribed scale.	
20. How early you can join this institute, if selected?	
<p>21. Reference:</p> <p>Give names / address of three professionals in the field who are in a position to comment on your professional work (The institute may write to them for a confidential assessment of the candidate's capabilities)</p>	
Name / Address	Telephone / Mobile / Fax / Email
<p>1.</p> <p>2.</p> <p>3.</p>	
22. Briefly explain (within 50 words) how you are suitable for this post.	
23. List of enclosures	
<p>(a)</p> <p>(b)</p> <p>(c)</p> <p>(d)</p> <p>(e)</p> <p>(f)</p> <p>(g)</p>	

DECLARATION

I, hereby declare that the information given in this application is true and correct to the best of my knowledge and belief. If any information is found false, my candidature may be disqualified without prejudice to any action that may be taken under the rules.

Station:

Date:
Candidate's Signature

Instructions to candidates:

- (1) This application should be returned to this office on or before the last date prescribed for receipt of application.
- (2) Any change in the mailing / contact address should be intimated to this office well in advance.
- (3) Proof in respect of their claims like age, educational qualifications, caste, work experience, etc., should be attached.
- (4) Candidates, who are in service at present, should obtain an endorsement given below from his / her employer.

**ENDORSEMENT BY THE EMPLOYER
(where the candidate is presently employed)**

Ref. No..... Date

Mr./ Mrs./ Ms./ Dr., joined at this Institute on..... who is at present employed as (Designation)a Permanent / Contract employee in this office, will be relieved if selected, without delay. His / Her present Basic pay is per month in the pay level..... as per VII CPC.

Signature

Designation