



GOVT. OF INDIA
CENTRAL LEPROSY TEACHING AND RESEARCH INSTITUTE
(MIN. OF HEALTH & FAMILY WELFARE, DTE. GENERAL OF HEALTH SERVICES)
CHENGALPATTU – 603 001- TAMIL NADU

No. 48/2/CLTRI/EI/2014

Dated: 28.11.2019

Applications are invited from eligible candidates working in the Central Government / Autonomous Institutions/ State Govt. for the posts mentioned below on Deputation basis for a Minimum period of 2 years.

Closing Date for the receipt of application : 20.12.2019

P

Sl.No.	Name of posts	No. of Vacancy	Pay Level in the Pay Matrix
1.	Upper Division Clerk	5	Pay Level-4 in the Pay Matrix (PB-1 Rs.5200-20200 + Rs.2400/- (G.P)(Pre-revised))
2.	Lower Division Clerk	8	Pay Level 2 in the Pay Matrix (PB-1 Rs.5200-20200 + Rs.1900/-(G.P)(Pre- revised))

1. UPPER DIVISION CLERK

No.of Post : 5 Nos
Pay Level in the Pay Matrix : Level-4

PB-1 Rs.5200-20200 + Rs.2400/-(Grade Pay) (Pre-revised)

Eligibility :

1. Holding Analogous posts on a regular basis or with 8 years regular service in the post of Lower Division Clerk in the Pay Level 2 in the pay matrix (Pay Band -1 Rs.5200-20200 + Rs.1900/-(G.Pay)(Pre-revised)) or 2 years regular service in the post of Upper Division Clerk in the Level-4(PB 1 Rs.5200-20200 + Rs .2400/-(G.Pay)(Pre-revised))
2. Experience in Establishmen, Accounts/Budget and General administration.
3. Good Knowledge in Computer operation.
4. **Hospital Patient Care Allowance of Rs 4100/- will be paid in addition to the salary.**

Terms & Conditions

- (I) The Departmental officials in the feeder category who are in the direct line of promotion shall not be eligible for consideration for appointment on deputation.
- (II) Similarly, the deputationists shall not be eligible for consideration for appointment by promotion.
- (III) Period of deputation including the period of deputation in another ex-cadre post held immediately preceding this appointment in the same or some other organization or department of the Central Government shall ordinarily not exceed three years.
- (IV) The Maximum age-limit for appointment by deputation shall be 'Not exceeding 56 years' as on the closing date of receipt of applications.
- (V) The Deputation period will be of 2 years initially. The deputation period may be curtailed or extended at the discretion of the Director at any time. *Applicable Deputation Allowance will be provided as per Govt. of India norms.* The application should clearly indicate the service particulars, experience and educational qualifications etc as per the enclosed Format. Please ensure that the application will be neatly typed in the A4 sheet as per our annexure format and with all the columns are filled.
- (VI) The duly attested photocopies of ACRs/APAR for the last five years along with vigilance clearance and with necessary copies of the certificates may be sent with the application through proper channel to the Director, Central Leprosy Teaching & Research Institute, Chengalpattu – 603 001. (Tamil Nadu). It may also be ensured that no vigilance / disciplinary proceedings are pending or being contemplated against the officials concerned. Applications without the attested copies of ACRs/APARs for the relevant period will be summarily rejected. Applications sent through Mail / Fax and after closing date for the receipt of application cannot be accepted. For enquiries contact 044-27427865.

2.LOWER DIVISION CLERK

No.of Post : 8 Nos

Pay Level in the Pay Matrix : Level-4

:PB-1 Rs.5200-20200 + Rs.1900/-(Grade Pay)(Pre-revised)

Eligibility :

1. With 2 years regular service in the post of Lower Division Clerk in the Pay Level 1 in the pay matrix (Pay Band -1 Rs.5200-20200 + Rs.1900/-(G.Pay) (Pre-revised))
2. Good Knowledge in Computer operation.
3. **Hospital Patient Care Allowance of Rs 4100/- will be allowed in addition to the salary.**

Terms & Conditions

- (I) Period of deputation including the period of deputation in another ex-cadre post held immediately preceding this appointment in the same or some other organization or department of the Central Government shall ordinarily not exceed three years.
- (II) The Maximum age-limit for appointment by deputation shall be 'Not exceeding 56 years' as on the closing date of receipt of applications.
- (III) The Deputation period will be of 2 years initially. The deputation period may be curtailed or extended at the discretion of the Director at any time. *Applicable Deputation Allowance will be provided as per Govt. of India norms.* The application should clearly indicate the service particulars, experience and educational qualifications etc as per the enclosed Format. Please ensure that the application will be neatly typed in the A4 sheet as per our annexure format and with all the columns are filled.
- (IV) The duly attested photocopies of ACRs/APAR for the last two years along with vigilance clearance and with necessary copies of the certificates may be sent with the application through proper channel **to the**

**Director, Central Leprosy Teaching & Research Institute,
Chengalpattu - 603 001. (Tamil Nadu).**

It may also be ensured that no vigilance / disciplinary proceedings are pending or being contemplated against the officials concerned. Applications without the attested copies of ACRs/APARs for the relevant period will be summarily rejected. Applications sent through Mail / Fax and after closing date for the receipt of application cannot be accepted. For enquiries contact 044-27427865.

The posts carry usual allowances as admissible to Central Government. Application of willing and eligible candidates for appointment to the said posts may please be forwarded and should reach this office on or before 20.12.19



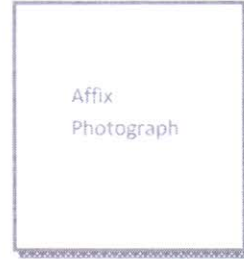
DIRECTOR

TO,
DEO (ES)

Total uploaded on CTR website Ph

↓
21/12/19

Format



1. Name :
2. Father / Husband Name :
3. Permanent Residential Address :
4. Age /Date of Birth :
5. Whether SC/ST/OBC/PH :
6. Educational Qualification :
7. Technical Qualification :
8. Service Particulars
- (a) Present post
- (b) Department / Organisation :
9. Particulars of the past service :

Department / Office	Post held (Specify whether ad-hoc or regular)	Period		Scale of Pay of the post	Nature of Duty
		From	To		
1	2	3	4	5	6

10. Particulars of Experience (in Detail) :
11. Any other information :
12. Enclosures
- a. ACR/APAR (for 5years /3 years) : Yes / No.
- b. Certificates (Educational) : Yes/No
13. Address for communication with E-mail id and contact No. :

UNDERTAKING

I hereby declare that all the statements made in this application are true and complete to the best of my knowledge & belief. I undertake that the department can take action against me or cancel my candidature without any intimation in case of I am declared by them to be guilty of furnishing wrong information or suppressing any facts.

Signature of Candidate.

Date:
Place:

(To be filled by the parent Office /Department)

Certified that the particulars furnished above by the candidate have been verified from his/her service records and found to be correct. It is also certified that no liability or vigilance case is either pending or contemplated against him/her. He/her ACRs (attested copies) are enclosed.

Date :

Signature of the Head of Office.

*All the columns are mandatory

