



## सीएसआईआर-भारतीय समवेत औषध संस्थान CSIR-Indian Institute of Integrative Medicine

(वैज्ञानिक तथा औद्योगिक अनुसंधान परिषद)  
(Council of Scientific & Industrial Research)

नहर मार्ग, जम्मू, जम्मू व कश्मीर (कें.शा.प्र.) – 180001  
Canal Road, Jammu, Jammu & Kashmir (U.T.) - 180001



### **Advertisement No.: 05R/2025 dated 24-10-2025**

**“CSIR-IIIM strives to have a workforce which reflects gender balance and women candidates are encouraged to apply.”**

|                                                        |                               |
|--------------------------------------------------------|-------------------------------|
| <b>Date of Commencement of Online Applications</b>     | 27-10-2025 (10:00 AM onwards) |
| <b>Last Date for Submission of Online Applications</b> | 25-11-2025 (upto 09:59 PM)    |

CSIR-Indian Institute of Integrative Medicine (CSIR-IIIM), Jammu, is a premier R&D Institute under Council of Scientific and Industrial Research (CSIR), an autonomous body under the Ministry of Science and Technology, Government of India. The Institute is engaged in high-quality Research and Development with a primary focus on drug discovery from natural resources.

This Institute invites **ONLINE** applications for recruitment to the post of Multi-Tasking Staff (MTS) as per the details given below:

#### **DETAILS OF POSITIONS, VACANCIES, QUALIFICATION, ETC.**

| Post Code & Name of the Post        | No. of Posts and Reservation Status         | Classification and Pay Level / Pay Matrix                                            | Age Limit*             | Place of Posting                                       |
|-------------------------------------|---------------------------------------------|--------------------------------------------------------------------------------------|------------------------|--------------------------------------------------------|
| MTS-01<br>Multi-Tasking Staff (MTS) | 13<br>[UR: 06; OBC: 04;<br>ST: 02; EWS: 01] | Group C<br>[Erstwhile Group 'D'<br>(Non-Tech.)]<br><br>Pay Level 1 (₹18000 - ₹56900) | Not exceeding 25 years | CSIR-IIIM, Jammu/<br>Associated Farms                  |
| MTS-02<br>Multi-Tasking Staff (MTS) | 06<br>[UR: 03; OBC: 02;<br>ST: 01]          |                                                                                      |                        | CSIR-IIIM Branch<br>Lab, Srinagar/<br>Associated Farms |

**\* Please see details of age relaxation under Age Relaxation Column.**

**Abbreviations:** **UR:** Unreserved; **OBC:** Other Backward Classes; **ST:** Scheduled Tribes; **EWS:** Economically Weaker Section

**Note:** The number of vacancies indicated against each post code is provisional and may increase or decrease at the time of selection.

#### **I. BENEFITS**

- The posts carry usual Pay and Allowances, such as House Rent Allowance, Transport Allowance, Dearness Allowance, etc., at Central Government rates as admissible to the Central Government Employees and as made applicable to the employees of Council stationed at Jammu (Class 'Y' City). Other benefits, such as Leave Travel Concession and Reimbursement of Medical Expenses (as per CGHS/CSMA Rules), are also available. The employees are provided with residential accommodation, subject to availability, as per CSIR rules.
- All new entrants will be governed by the "New Pension Scheme" applicable w.e.f. 01.01.2004 as notified by the Government of India and adopted by CSIR vide their letter number 17/68/2001-E.II dated 23.12.2003 and other instructions issued on the subject from time to time. However, persons selected from other Government Departments / Autonomous Bodies / Public Sector Undertakings / Central Universities having Pension Scheme on GOI pattern and who are presently being governed by the Old Pension Scheme will continue to be governed by the existing Pension Scheme i.e. CCS (Pension) Rules, 2021, if applied through the proper channel.

## II. AGE LIMIT AND RELAXATIONS IN THE UPPER AGE LIMIT

1. The cut-off date for determining the age, qualifications, claim of SC/ ST/ OBC (NCL)/ EWS/ PwBD status or any other benefit viz. fee relaxation, reservation, age-relaxation, etc., where not specified otherwise shall be the last date for submission of online applications.
2. Relaxation of 5 years to the members of Scheduled Castes/ Scheduled Tribes and 3 years to the members of Other Backward Classes in the upper age limit shall be allowed only in cases where such posts are reserved for that particular category.
3. As per GOI provisions, in case of Widows, Divorced Women and Women Judicially separated from Husbands, who are not re-married, the upper age limit for such women is up to the age of 35 years [up to 40 years for members of Scheduled Castes], as the case may be. The persons claiming age relaxation under this sub-para would be required to produce the following documentary evidence:
  - a. In case of Widow, the Death Certificate of her husband together with the Affidavit that she has not remarried since.
  - b. In case of divorced Women and Women judicially separated from their husbands, a certified copy of the judgment/decreed of the appropriate Court to prove the fact of divorce or judicial separation, as the case may be, with an Affidavit in respect of divorced Women and they have not remarried since.
4. Age relaxation of 10 years (15 years for SC and 13 years for OBC candidates) in the upper age limit shall be allowed to persons suffering from (a) blindness or low vision (b) deaf and hard of hearing (c) loco motor disability or cerebral palsy, leprosy cured, dwarfism, acid attack victims and muscular dystrophy (d) autism, intellectual disability, specific learning disability and mental illness and (e) multiple disabilities from amongst persons under clauses (a) to (d) including deaf blindness subject to the condition that maximum age of the applicant on the crucial date shall not exceed 56 years. The age concession to the persons with benchmark disabilities shall be admissible irrespective of the fact whether the post is reserved for persons with disabilities or not, provided the post is identified as suitable for the relevant category of disability. Relaxation of the age limit would be permissible to such persons who have a minimum 40% disability.

**Note:** The suitability of posts for various benchmark disabilities as per the Rights of Persons with Disabilities (RPwD) Act, 2016 in accordance with Notification No. 38-16/2020-DD-III dated 04.01.2021 issued by Department of Empowerment of Persons with Disabilities (Divyangjan), Ministry of Social Justice and Empowerment or as identified for specific posts, is as detailed below:

| Designation         | Suitable Categories of Benchmark Disability                                                                                                                                             |
|---------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Multi-Tasking Staff | a) B, LV<br>b) D, HH<br>c) OA, BA, OL, BL, OAL, CP, LC, Dw, AAV, MDy, SD / SI without neurological limb dysfunction<br>d) ASD (M, MoD), ID, SLD, MI<br>e) MD involving (a) to (d) above |

Abbreviations used: B=Blind, LV=Low Vision, HH=Hard of Hearing, OA=One Arm, OL=One Leg, BL=Both Legs, OAL=One Arm and One Leg, CP=Cerebral Palsy, LC=Leprosy Cured, Dw=Dwarfism, AAV=Acid Attack Victims, ASD (M)=Autism Spectrum Disorder (Mild), SLD=Specific Learning Disability, D=Deaf, BA=Both Arms, Dw=Dwarfism, Mdy=Muscular Dystrophy, MI=Mental Illness, MD=Multiple Disabilities involving all the above categories

5. Age relaxation to the Ex-Servicemen will be applicable as per the Government of India/CSIR Instructions, as amended from time to time.
6. The benefit of reservation under EWS category will be regulated as per DoPT OM No. 36039/1/2019-Estt.(Res.), dated 31.01.2019 and any other GoI instructions applicable in this regard, at the time of last date of submission of application.
7. Further, the crucial/cut-off date for submitting Income and Asset certificate by the EWS candidate will be the closing date for submission of application for the post. Income & Asset Certificates issued subsequent to the crucial/cut-off date and for the later Financial Year shall not be accepted. Further, Family Gross Annual Income shall be computed for the financial year prior to the year of last date of submission of online application.

8. Candidates may also note that their candidature will remain provisional till the veracity of the concerned document is verified by the Institute. Candidates are cautioned that a suitable action will be taken in case they fraudulently claim SC/ST/OBC(NCL)/EWS/PwBD/ESM status or avail any other benefit.
9. All statutory categories (SC/ST/OBC(NCL)/EWS/PwBD/Ex-Servicemen etc.) candidates seeking any kind of relaxation are required to upload a copy of the applicable certificate in the prescribed format as the case may be (**Annexure I, II, IV, V, VI, VII & XII**) signed by the specified authority valid for appointment of posts under the Central Government. In addition, the OBC (NCL) candidates have to submit a declaration as per **Annexure III**.
10. There is no age limit for departmental candidates (CSIR Employees) provided they possess the prescribed qualifications.
11. Date of birth filled by candidate in the online application form and the same recorded in the Matriculation/ Secondary Examination Certificate will be accepted by the Institute for determining the age and no subsequent request for change will be considered or granted. Date of birth should be supported with High School or Higher Secondary or Secondary School Certificate or extracts from Birth Register.

### III. **ESSENTIAL QUALIFICATION, EXPERIENCE, ETC.**

| <b>Essential Qualification</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Matriculation or equivalent pass.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Desirable Qualification</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| Intermediate (12 <sup>th</sup> Class) Pass and Experience in the relevant area of work.                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>Job Requirements / Nature of Job</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <b>◆ <u>MTS - Office Maintenance</u></b> <ul style="list-style-type: none"> <li>➤ Physical Maintenance of records of Section</li> <li>➤ General Cleanliness &amp; Upkeep of the Section</li> <li>➤ Carrying of files &amp; documents to other Sections</li> <li>➤ Photocopying, Sending FAX, etc.</li> <li>➤ Delivering the Dak</li> <li>➤ Opening &amp; Closing the Section</li> <li>➤ Any other work/job assigned from time to time by the Competent Authority.</li> </ul>                                                                   | <b>◆ <u>MTS - Hospitality Services</u></b> <ul style="list-style-type: none"> <li>➤ Physical Maintenance of records of Guest House</li> <li>➤ Collection and remittance of Guest House charges</li> <li>➤ General Cleanliness &amp; Maintenance of Rooms</li> <li>➤ Attending to Guest's complaints, queries and requirements</li> <li>➤ Dusting of furniture etc.</li> <li>➤ Preparation and supply of Tea/Coffee to the Guests</li> <li>➤ If required, incumbent may have to work in shift duties</li> <li>➤ Any other work/job assigned from time to time by the Competent Authority.</li> </ul> |
| <b>◆ <u>MTS - Horticulture / House Keeping</u></b> <ul style="list-style-type: none"> <li>➤ Maintenance and upkeep of Gardens and Green spaces</li> <li>➤ Planting, nurturing, and caring for plants, as well as maintenance of garden activities such as mowing lawns, trimming hedges, weeding, and clearing debris.</li> <li>➤ Watering, Fertilizing &amp; Pest Control</li> <li>➤ Physical Maintenance of records of Work area, stock entry</li> <li>➤ Any other work/job assigned from time to time by the Competent Authority</li> </ul> | <b>◆ <u>MTS - Transport</u></b> <ul style="list-style-type: none"> <li>➤ Maintenance &amp; upkeep of vehicles</li> <li>➤ Scheduling maintenance and repairs</li> <li>➤ Managing vehicle records and log books</li> <li>➤ Managing and allocation of duties</li> <li>➤ Liaising with office for preparation of bills of Vehicles</li> <li>➤ Processing Fast-tag, Insurance renewal bills</li> <li>➤ Performing Driver duties if required, in such cases eligible for honorarium as per Rules.</li> <li>➤ Any other work/job assigned from time to time by the Competent Authority</li> </ul>         |

### IV. **SCHEME OF EXAMINATION, SYLLABI AND BREAK-UP OF MARKS**

#### a. **Selection Procedure:**

Candidates who fulfill the eligibility criteria as recommended by the Screening Committee will be called for a Trade Test, which is intended to assess the candidate's practical knowledge in the relevant area as per the job requirements.

The Selection Committee will determine the mode of the Trade Test and will also conduct the same. Each candidate must choose one area in which they wish to be tested; the Trade Test will be arranged accordingly.

If a candidate does not indicate their preferred area for the Trade Test, an area will be assigned to them based on their experience in the relevant field. However, the Selection Committee, at its discretion, may assign any one or more areas for the Trade Test, irrespective of the candidate's choice, depending on the requirements and the candidate's experience. The decision of the Selection Committee shall be final and binding on all candidates.

Candidates who qualify in the Trade Test will be eligible to appear for the Competitive Written Examination (CWE). The final merit list will be prepared based on the performance of the candidates in the CWE, which will consist of a single paper. The merit list will be drawn solely on the basis of the marks obtained in this paper.

b. **Scheme & Syllabus of Competitive Written Examination:**

|                               |                                                                                          |
|-------------------------------|------------------------------------------------------------------------------------------|
| <b>Mode of Examination</b>    | OMR Based Objective Type Multiple Choice Examination                                     |
| <b>Medium of Questions</b>    | The questions will be set in English and Hindi except the questions on English Language. |
| <b>Standard of Exam</b>       | Class 10                                                                                 |
| <b>Total No. of Questions</b> | 150                                                                                      |
| <b>Total Time Allotted</b>    | 2 hours                                                                                  |

| Subject              | No. of Questions | Maximum Marks                             | Negative Marks                            |
|----------------------|------------------|-------------------------------------------|-------------------------------------------|
| General Intelligence | 25               | 75 (three marks for every correct answer) | One negative mark for every wrong answer. |
| Quantative Aptitude  | 25               | 75 (three marks for every correct answer) | One negative mark for every wrong answer. |
| General Awareness    | 25               | 75 (three marks for every correct answer) | One negative mark for every wrong answer. |
| English Language     | 25               | 75 (three marks for every correct answer) | One negative mark for every wrong answer. |

- c. **Methodology for resolution of tie cases:** If two or more candidates obtain the same aggregate marks, the tie shall be resolved in accordance with CSIR Letter No. 5-1(211)/2014-PD dated 30.05.2023.

V. **GENERAL CONDITIONS AND INFORMATION**

1. The applicant must be a citizen of India.
2. All applicants must fulfil the essential requirements of the post and other conditions stipulated in the advertisement. They are advised to satisfy themselves before applying that they possess at least the essential qualifications laid down for the posts as on the last date of submission of online applications. No enquiry asking for advice as to eligibility will be entertained. The prescribed educational qualifications should have been obtained from a University/ Institution/ Board recognized by Govt. Of India/ approved by Govt. Regulatory Bodies and the final result should have been declared on or before the last date of submission of online applications.
3. The candidate should mention in the application all the qualifications in the relevant column over and above the minimum prescribed qualification, supported with documents.
4. Merely fulfilling the minimum prescribed qualifications will not vest a right in a candidate for being called for Written Exam and Proficiency Test or appointment. If on verification either before or after at any of the stages of selection process, it is found that any candidate does not fulfil any of the eligibility conditions, his/her candidature will be summarily cancelled forthwith.
5. In respect of equivalent clause in Essential qualifications, if a candidate is claiming a particular qualification as equivalent qualification as per the requirement of advertisement, then the candidate is required to produce order / letter in this regard, indicating the Authority (with number and date) under which it has been so treated otherwise the Application is liable to be rejected.

6. All applicants must ensure to upload scanned copy of original documents of the relevant certificates i.e. proof for Date of Birth certificate (Matriculation or equivalent certificate for age proof), educational qualification, caste certificate, EWS certificate etc., if applicable, along with online application, failing which application will not be considered. Incomplete applications or applications without uploading the scanned copy of original certificates/documents, requisite application fee are liable to be rejected.
7. In case of qualification equivalent to essential qualification, the candidates are required to ensure that the degrees/diploma/certificates produced by them in support of essential qualifications are issued by UGC/AICTE recognized universities/institutes/boards. In case if at any later stage it is found that the Diploma/Degree/Certificate has been issued from unrecognized Institute/University/Boards, the candidacy or appointment will be liable to be rejected or cancelled, as per extant rule provisions applicable.
8. If any document/certificate furnished is in a language other than Hindi or English, a transcript of the same duly attested by a Gazetted Officer or Notary is to be uploaded/produced.
9. The date of determining the upper age limit, qualifications, etc., shall be the last date of submission of online application.
10. Any discrepancy found between the information given in application and as evident in original documents will make the candidate ineligible for appearing in the Written Exam / Proficiency Test in Stenography or even at the subsequent stages of the recruitment process.
11. It may please be well noted that the appointments to the reserved posts will be provisional and subject to the verification of caste certificates through proper channels. If the verification reveals that the claim of the candidate that he/she belongs to the SC/ST/OBC(NCL)/EWS/PwBD is false OR it reveals that the claim of the candidate that he/she belongs to the non-creamy layer (for OBC-NCL) is false, his/her services will be terminated forthwith without assigning any further reasons and without prejudice to such further action as may be taken under the provisions of the relevant laws for production of false certificate.
12. No travelling allowance will be paid to candidates to appear for Written Exam or Trade Test.
13. **The selected persons should be ready to serve anywhere under the administrative control of the Director, CSIR-IIIM, Jammu, and they can be transferred to any of the Labs/ Institutes of CSIR anywhere in India as and when the need arises.**
14. The selected candidates will be on probation for a period of two years from the date of joining the post. The probationary period may be extended or curtailed at the discretion of the Competent Authority. After successful completion of the probationary period, they will be considered for confirmation in accordance with the extant rules.
15. Applicants must disclose as to whether any of their close or blood relatives are employees of CSIR or any other Laboratory/Institute of CSIR in the application form. Close relations would include wife/ husband/ son/ daughter/ parents/ brother/ sister or any person related to them by blood or marriage, whether they are dependent or not.
16. The decision of the Competent Authority, CSIR-IIIM in all matters relating to eligibility, acceptance or rejection of applications, mode of selection and conduct of Written Exam, Proficiency test in Computer Typing/Stenography will be final and binding on the candidates.
17. Canvassing in any form and/or bringing any influence political or otherwise will be treated as a disqualification for the post.
18. Any further information regarding this advertisement like date, time and venue of tests, addendum/ corrigendum or any variation in the number of post/ cancellation of post etc., will be made available through CSIR-IIIM website [www.iiim.res.in](http://www.iiim.res.in) ONLY. Therefore, candidates are advised to keep visiting regularly the website of the Institute.
19. It is necessary that only accurate, full and correct information is furnished by the applicants in the online application forms. If any declaration given or information furnished by any candidate proves to be false or if he/she is found to have wilfully suppressed any material information, his/her candidature may be cancelled at any stage and/or he/she will be liable to removal from service after joining at any stage, and such other action as may be deemed necessary may be taken by the Competent Authority.

20. **Incomplete applications in any respect (i.e. missing signature or photograph, lack of requisite educational qualification documents, non-payment of application fee, if applicable, etc.) will not be entertained and are liable to be summarily rejected.**
21. The decision of the Competent Authority, CSIR-IIIM in all matters relating to eligibility, acceptance or rejection of applications, mode of selection, conduct of written test etc. will be final and binding on the candidates. The Competent Authority, CSIR-IIIM has the right to amend, delete and add terms and conditions to this advertisement.
22. Persons with Benchmarks Disabilities (PwBD) fulfilling the eligibility conditions prescribed under Gol instructions are encouraged to apply.
23. Applicants working in Government Departments/ PSUs/ Autonomous Bodies shall be required to upload a 'No Objection Certificate' from their present employer while filling up the online application, indicating that the office/department has no objection to the application and that the applicant, if selected, will be relieved within one month of the issuance of appointment letter, failing which their candidature will NOT be considered.
24. If in any recruitment year, a vacancy earmarked for the EWS category cannot be filled due to the non-availability of a suitable EWS candidate, such vacancy shall not be carried forward to the next recruitment year as backlog. Instead, the post shall be filled by a candidate from the UR category.
25. The Competent Authority, CSIR-IIIM reserves the right to cancel the advertisement without assigning any reason thereof or reserves the right not to fill up the posts. **The number of vacancies is purely provisional and may vary either way at the time of selection.** This advertisement does not necessarily tantamount to the selection being actually made. The selection is subject to the CSIR/Gol instructions prevalent at a given point of time during various stages of selection process.
26. In case candidates are unable to submit their online application due to server issues or other technical problems at the last moment, the deadline will not be extended. **Therefore, candidates are strongly advised to submit their applications well in advance and not wait until the last date.**
27. For any issue that is not covered in this advertisement, appropriate instructions of CSIR will apply.
28. **NO INTERIM ENQUIRY OR CORRESPONDENCE WILL BE ENTERTAINED.**

**VI. How to Apply:**

1. Eligible candidates are required to apply ONLINE by accessing the website <https://recruit.iim.res.in> or <https://iim.res.in>. Candidates are advised to carefully read the step-by-step application procedure outlined below before proceeding with their application.
2. If the candidate does not have a valid email id, he/she should create a new valid email ID before applying online and should be kept active during the entire recruitment process.
3. Candidates are required to pay application fee of ₹500/- (Rupees Five Hundred Only) through State Bank Collect (SB Collect). **No fee is payable, subject to uploading of relevant document, for SC/ ST/ PwBD/ Women/ Ex-Servicemen/ Regular CSIR Employees.** Applications without the prescribed fee will not be considered and summarily rejected. No representation against such rejection would be entertained.
4. Applications submitted cannot be withdrawn, and fees paid are non-refundable under any circumstances. Additionally, fees cannot be held in reserve for future examinations or selections.
5. If the Board, University, or Institute awards CGPA/SGPA/OGPA/DGPA/CPI grades etc., the candidate must convert these into a percentage using the formula provided by the concerned Board /University/Institution. Additionally, copy of the conversion formula issued by concerned Board/University/Institution must be uploaded along with online application. Failure to submit the conversion formula along with the online application form, if applicable, will result in the application being treated as incomplete.
6. **Only one application per candidate will be accepted for each postcode.** If a candidate submits multiple online applications for the same postcode using different email addresses, only the most recent completed

application will be considered. Candidates should retain a copy of the application print-out and any payment details for their records, as these will not be available after the application deadline.

7. **A candidate can apply for multiple postcodes, provided they fulfil all eligibility criteria for each individual postcode. However, the candidate must complete a separate application along with the requisite application fee separately for each postcode.**
8. The candidate must register with their name and email address. After successful registration, the candidate can log in using their credentials to apply through the Online Application Portal. Once the application form is completed, the candidate can upload all relevant supporting documents and verify the application to ensure it is accurate and complete. After finalizing the application, the candidate must click 'Final Submit' on the draft application to successfully submit the application form. Once the application is submitted, no further modifications or amendments will be permitted. It is important to keep a printout of the completed application form.
9. Once submitted, any request for change or correction in the application form will not be accepted under any circumstances.
10. In the event of a fake or fabricated application or registration, that misuses the name or photo of any other person, the candidate and/or cyber café will be held accountable for appropriate legal action.
11. Candidates currently working in CSIR/ Government Organisations/ Autonomous Bodies/ Statutory Bodies/ Universities/ PSU etc., as regular employee, must upload a 'No Objection Certificate' (NOC) from their employer, along with their online application. Failure to do so will rendered the application as incomplete.
12. Candidates are advised to check the website regularly. For addendum/corrigendum and updated information regarding this advertisement, please visit our website: <https://iiim.res.in>.
13. No separate individual information/intimation shall be sent to the candidates. Therefore, candidates are advised to keep visiting this website regularly.
14. No separate call letters will be mailed to candidates. All notifications and communications will be sent via email provided by the candidate in the application form.
15. Any information provided by an applicant in their online application form will be binding on the candidate. They will be liable for prosecution and civil consequences if the information or details submitted are found to be false at any later stage.

**16. The step-by-step application procedure is as under:**

**Step 1: Payment of Application Fee:** Candidates must remit the application fee of ₹500/- (wherever applicable) through SB Collect by clicking on the link [here](#). On the SB Collect homepage, type 'Indian Institute of Integrative Medicine' in the search box and click on the suggested result. Under the payment category option, select '**APPLICATION FEE - Advt. 05R/2025**' and enter all the required details on the next page. After completing the payment, candidates should retain the e-receipt as it must be sent along with the hard copy of the application.

**Step 2: Registration on the Portal:** After successful payment, candidates must register on the Online Recruitment Portal for the relevant post, by accessing the link [here](#). Upon registration, candidates will receive an email confirmation along with a verification link. Candidates must click the verification link to confirm their email address. Note that without email verification, they will not be able to log in.

**Step 3: Filling the Application Form and Document Upload:** After logging in, candidates must complete all sections of the application form, including Personal Details, Educational Details, Experience Details, and Payment Reference/Transaction Number and Date. The candidates must upload their latest photograph, signature and all relevant documents including the payment receipt.

The candidates are required to upload a recent (i.e. not more than three months old) scanned colour passport size photograph in JPEG format with image dimension of 300px (width) x 400px (height). The photograph should be without cap and both ears should be clearly visible. The applications without photograph are liable to be rejected.

The candidates are required to upload their signature in JPEG format with image dimension of 300px (width) x 100px (height). The applications without signature are to liable be rejected.

**Step 4: Review and Submit:** After filling all the details and uploading the requisite documents, candidates must review all the filled details and uploaded documents carefully, ensure all details are correct, then click the 'I Agree' button under the Declaration section and select 'Final Submit.'

Note: Without clicking on 'Final Submit,' the application form will remain incomplete. After final submission, no changes will be allowed.

Note: Applicants are advised to strictly adhere to the instructions. The information submitted in the online application will be considered as final for further processing. The validation rules and design of the online application are based on the requirements outlined in the advertisement and no representation in this regard will be entertained. Candidates should carefully read the advertisement and refer to the "Instructions" section on the application portal. Submission of an online application does not guarantee that the candidate meets all eligibility criteria stated in the advertisement. Applications are subject to subsequent scrutiny and may be rejected if ineligibility is discovered at later stages. Appointments for reserved positions will be provisional, pending verification of caste certificates through appropriate channels. If verification reveals that a candidate's claim to SC/ST/OBC/EWS/PwBD status is false or incorrect, their employment will be terminated immediately without assigning any reasons and without prejudice to further legal action as deemed fit.

**Following documents must be uploaded along with online application form:**

1. Copy of e-receipt/Payment receipt for the application fee of ₹500/- (wherever applicable).
2. Recent passport size colour photograph uploaded at appropriate place.
3. Signature of the candidate uploaded at appropriate place.
4. Copy of Matriculation/10th Standard or equivalent marksheet/certificate indicating date of birth or School leaving certificate indicating Date of Birth in support of Name and Date of Birth.
5. Copy of Gazette Notification/Affidavit from appropriate authority in support of change of name/ mismatch in name/ variation in name of candidate/ parents (if applicable).
6. Copy of educational certificate(s) and/or marksheet(s) supporting the essential qualifications and any higher qualifications.
7. Copy of Scheduled Caste/Scheduled Tribe/Other Backward Class/PwBD certificate(s) in the prescribed Government of India (GoI) format issued by the specified authority, if applicable.
8. Copy of the 'Form of Declaration' from OBC (Non-Creamy Layer) candidates, supporting their claim in the application that they do not belong to the OBC (Creamy Layer) category based on income for the immediate preceding three financial years (Annexure-III), along with the category certificate.
9. Copy of the judgment/decreed from the appropriate court of law for widow, divorced, or judicially separated women, to verify the status of divorce or judicial separation, if applicable. Additionally, an affidavit confirming that such candidate has not remarried.
10. Copy of the certificate issued by the competent authority in the prescribed format for Departmental candidates claiming age concession.
11. Copy of the 'No Objection Certificate' (NOC) from the employer for candidates currently working as regular employee in CSIR/Government Organisations/Autonomous Bodies/Statutory Bodies/Universities/PSUs etc.
12. Any other relevant certificates in support of the claim(s) made in the application, as applicable.

Note 1: The documents/certificates uploaded must be legible.

Note 2: Applications without the required document(s) will be considered as incomplete and will be summarily rejected.

Note 3: Candidates will be asked to bring the documents in original along with the self-attested photocopies at an appropriate time.

Note 4: The decision of the Appointing Authority in all matters relating to eligibility, acceptance or rejection of applications, mode of selection, and conduct of examination/seminar/Interview/ test will be final and binding on the candidates.

Note 5: **NO HARD COPY OF THE APPLICATION FORM OR ANY DOCUMENT IS REQUIRED TO BE SENT TO CSIR-IIIM. APPLICATIONS WILL BE ACCEPTED ONLY THROUGH THE ONLINE MODE. CANDIDATES MUST RETAIN A PRINTOUT OF THE GENERATED APPLICATION FORM FOR FUTURE REFERENCE.**

**DISCLAIMER**

Instances for providing incorrect information and/or process violation by a candidate detected at any stage of the selection process will lead to disqualification of the candidate from the selection process and he/she will not be allowed to appear in any of the Recruitment Process in the future. If such instances go undetected during the current selection process but are detected subsequently, such disqualification will take place with retrospective effect. Clarifications/decisions given/to be given by CSIR-IIIM, regarding process for recruitment shall be final and binding.

**ADMINISTRATIVE OFFICER**



**CSIR-IIIM**

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**THE FORM OF CERTIFICATE TO BE PRODUCED BY SCHEDULED CASTES AND SCHEDULED TRIBES  
CANDIDATES APPLYING FOR APPOINTMENT TO POSTS UNDER THE GOVERNMENT OF INDIA**

This is to certify that Shri/Shrimati/Kumari\* ..... Son/daughter\*  
of ..... of ..... village/town\* ..... in  
District/Division\* ..... of the State/Union Territory\* ..... belongs to  
the ..... caste/tribe\* which is recognised as a Scheduled Caste/Scheduled Tribe\* under: -

- @ The Constitution (Scheduled Castes) Order, 1950
- @ The Constitution (Scheduled Tribes) Order, 1950
- @ The Constitution (Scheduled Castes) Union Territories Order, 1951
- @ The Constitution (Scheduled Tribes) Union Territories Order, 1951

[as amended by the Scheduled Castes and Scheduled Tribes List (Modification) Order, 1956; the Bombay Reorganisation Act, 1960, the Punjab Re-organisation Act, 1966, the State of Himachal Pradesh Act, 1970, the North Eastern Areas (Reorganisation) Act, 1971, the Scheduled Castes and Scheduled Tribes Order (Amendment) Act, 1976., the State of Mizoram Act, 1986, the State of Arunachal Pradesh Act, 1986 and the Goa, Daman and Diu (Reorganisation) Act, 1987.]

- @ The Constitution (Jammu and Kashmir) Scheduled Castes Order, 1956
- @ The Constitution (Andaman and Nicobar Islands) Scheduled Tribes Order, 1959 as amended by the Scheduled Castes and Scheduled Tribes Order (Amendment) Act, 1976
- @ The Constitution (Dadar and Nagar Haveli) Scheduled Castes Order, 1962
- @ The Constitution (Dadar and Nagar Haveli) Scheduled Tribes Order, 1962
- @ The Constitution (Pondicherry) Scheduled Castes Order, 1964
- @ The Constitution (Uttar Pradesh) Scheduled Tribes Order, 1967
- @ The Constitution (Goa, Daman and Diu) Scheduled Castes Order, 1968
- @ The Constitution (Goa, Daman and Diu) Scheduled Tribes Order, 1968
- @ The Constitution (Nagaland) Scheduled Tribes Order, 1970
- @ The Constitution (Sikkim) Scheduled Castes Order, 1978
- @ The Constitution (Sikkim) Scheduled Tribes Order, 1978
- @ The Constitution (Jammu & Kashmir) Scheduled Tribes Order, 1989
- @ The Constitution (SC) Order (Amendment) Act, 1990
- @ The Constitution (ST) Order (Amendment) Act, 1991
- @ The Constitution (ST) Order (Second Amendment) Act, 1991
- @ The Scheduled Castes and Scheduled Tribes Orders (Amendment) Act 2002
- @ The Constitution (Scheduled Castes) Order (Amendment) Act, 2002
- @ The Constitution (Scheduled Castes and Scheduled Tribes) Orders (Amendment) Act, 2002
- @ The Constitution (Scheduled Castes) Orders (Second Amendment) Act, 2002
- @ The Constitution (Scheduled Caste) Order (Amendment) Act 2007

% 2. Applicable in the case of Scheduled Castes/Scheduled Tribes persons who have migrated from one State/Union Territory Administration to another:

This certificate is issued on the basis of the Scheduled Castes/Scheduled Tribe certificate issued to Shri/Shrimati\* ..... Father/Mother ..... of Shri/Shrimati/Kumari\* ..... of village/town\*/Territory\*\* ..... in District/Division\* ..... of the State/Union Territory\* ..... who belong to the caste/tribe\* which is recognised as a Scheduled Caste/Scheduled Tribe\* in the State/Union Territory\* issued by the ..... dated .....

%3. Shri/Shrimati/Kumari\*.....and/or\* his/her\* family ordinarily resides in village/town\*.....of.....District/Division\* of the State/Union Territory\* of.....

Signature.....

\*\*Designation.....

(With Seal of Office)  
State/Union Territory\*

Place:.....

Date:.....

\*Please delete the words which are not applicable.

@Please quote specific Presidential Order.

%. Delete the paragraph which is not applicable

NOTE: The term "ordinarily reside (s)" used here will have the same meaning as in Section 20 of the Representation of the People Act. 1950.

\*\*List of authorities empowered to issue Scheduled Caste/Scheduled Tribe Certificate

- (i) District Magistrate/Additional District Magistrate/Collector/Deputy commissioner/Additional Deputy Commissioner/Deputy Collector/ 1st Class stipendiary Magistrate/ Sub-Divisional Magistrate/Taluka Magistrate/Executive Magistrate/Extra Assistant Commissioner. (not below of the rank of 1st Class Stipendiary Magistrate)
- (ii) Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate.
- (iii) Revenue Officers not below the rank of Tehsildar.
- (iv) Sub Divisional Officer of the area where the candidate and/or his/her family normally resides
- (v) Administrator/Secretary to Administrator/Development Officer (Lakshadweep)
- (vi) Note: ST candidates belonging to Tamil Nadu State should submit caste certificate ONLY FROM THE REVENUE DIVISIONAL OFFICER.

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**FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES APPLYING FOR  
APPOINTMENT TO POSTS UNDER THE GOVERNMENT OF INDIA**

This is to certify that Shri/Smt./Kumari \_\_\_\_\_ son/daughter of \_\_\_\_\_ village/town \_\_\_\_\_ in District/Division belongs to the \_\_\_\_\_ community which is recognised as a backward class under the Government of India, Ministry of Social Justice and Empowerment's Resolution No. \_\_\_\_\_ dated \_\_\_\_\_\* and/or his family ordinarily reside(s) in the \_\_\_\_\_ District/Division of the \_\_\_\_\_ State/Union Territory.

This is also to certify that he/she does not belong to the persons/sections (Creamy Layer) mentioned in Column 3 of the Schedule to the Government of India, Department of Personnel & Training O.M. No. 36012/22/93Estt. (SCT) dated 8.9.1993, OM No. 36033/3/2004- Estt. (Res) dated 9th March, 2004, O.M. No. 36033/3/2004-Estt. (Res) dated 14th October, 2008 and O.M. No. 36033/1/2013-Estt. (Res) dated 27th May, 2013\*\*

Signature \_\_\_\_\_

Designation \_\_\_\_\_ \$

Dated: \_\_\_\_\_

Seal \_\_\_\_\_

\*- The authority issuing the certificate may have to mention the details of Resolution of Government of India, in which the caste of the candidate is mentioned as OBC.

\*\* - As amended from time to time.

\$ - List of Authorities empowered to issue Other Backward Classes certificate will be the same as those empowered to issue Scheduled Caste/Scheduled Tribe certificates.

Note: - The term "Ordinarily" used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.

**FORM OF DECLARATION TO BE SUBMITTED BY THE OBC (NCL) CANDIDATE**  
**(IN ADDITION TO THE COMMUNITY CERTIFICATE)**

I \_\_\_\_\_ Son/daughter of Shri \_\_\_\_\_ resident of  
 village/town/city \_\_\_\_\_ district \_\_\_\_\_ state \_\_\_\_\_ hereby  
 declare that I belong to the \_\_\_\_\_ community which is recognized as a backward class  
 by the Government of India for the purpose of reservation in services as per orders contained in Department of  
 Personnel and Training Office Memorandum No. 36102/22/93-Estt.(SCT) dated 8-9-1993. It is also declared that I  
 do not belong to persons/sections (Creamy Layer) mentioned in column 3 of the Schedule to the above referred  
 Office Memorandum dated 8-9-1993, O.M. No. 36033/3/2004-Estt.(Res.) dated 9th March, 2004 and O.M. No.  
 36033/3/2004-Estt.(Res.) dated 14th October, 2008 and as amended time to time.

I also declare that the condition of status/annual income for creamy layer of my Parents/guardian is within  
 prescribed limits as on last date of application.

Signature \_\_\_\_\_

Full Name \_\_\_\_\_

Address \_\_\_\_\_

Place: \_\_\_\_\_

Date: \_\_\_\_\_

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Government of .....  
(Name & Address of the authority issuing the certificate)

**INCOME & ASSEST CERTIFICATE TO BE PRODUCED BY  
ECONOMICALLY WEAKER SECTIONS**

Certificate No.....

Date:.....

VALID FOR THE YEAR.....

This is to certify that Shri/Smt./Kumari..... son/daughter/wife  
of ..... permanent resident of, ..... Village/ Street, Post  
Office, Territory.....Pin Code..... whose photograph is attested below belongs to  
Economically Weaker Sections, since the gross annual income\* of his/her family\*\*is below Rs. 8 lakhs (Rupees  
Eight Lakh only) for the financial year.....His/her family does not own or possess any  
of the following assets\*\*:

- I. 5 acres of agricultural land and above;
- II. Residential flat of 1000 sq. ft. and above
- III. Residential plot of 100 SQ. Yards and above in notified municipalities;
- IV. Residential plot of 200 sq. yards and above in. areas other than the notified municipalities.

2. Shri/Smt./Kumari..... belongs to the..... caste which is not recognized  
as a Scheduled Caste, Scheduled Tribe and Other Backward Classes (Central List).

Recent passport  
size attested  
photograph of  
the applicant

Signature with seal of Office.....

Name.....

Designation.....

\*Note 1: Income covered all sources i.e. salary, agriculture, business, profession, etc.

\*\*Note 2: The term 'Family' for this purpose include the person, who seeks benefit of reservation, his/her parents  
and siblings below the age of 18 years as also his/her spouse and children below the age of 18 years

\*\*\*Note 3: The property held by a 'Family' in different locations or different places/cities have been clubbed while  
applying the land or property holding test to determine EWS status.

## Form-V

## Certificate of Disability

(In cases of amputation or complete permanent paralysis of limbs or dwarfism and in cases of blindness)  
[See rule 18(1)]

(NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE CERTIFICATE)

Recent Passport Size Attested  
Photograph (Showing face  
only) of the person with  
disability

Certificate No.....

This is to certify that I have carefully examined Shri/Smt/Kum..... Son/Wife/Daughter of  
Shri..... Date of Birth.....(DD/MM/YY) Age..... years,  
male/female..... Registration No.....Permanent resident of House  
No..... Ward/Village/Street.....  
Post Office..... District..... State.....

Whose photograph is affixed above, and am satisfied that:

(A) he/she is a case of:

- Locomotor disability
- Dwarfism
- Blindness (Please tick as applicable)

(B) the diagnosis in his/her case is..... (A) He/she  
has..... % (in figure) ..... percent (in words)  
permanent Locomotor Disability/dwarfism/blindness in relation to his/her ..... (part of body) as per  
guidelines (.....number and date of issue of the guidelines to be specified).

2. The applicant has submitted the following document as proof of residence: -

| Nature of Document | Date of Issue | Details of authority issuing certificate |
|--------------------|---------------|------------------------------------------|
|                    |               |                                          |

(Signature and seal of Authorised Signatory  
of Notified Medical Authority)

Signature/Thumb impression  
of the person in whose favour  
certificate of disability  
certificate is issued.

**Form-VI**  
**Certificate of Disability**  
**(In cases of multiple disabilities)**  
**[See rule 18(1)]**

**(Name and Address of the Medical Authority issuing the Certificate)**

Recent passport size attested  
 photograph (Showing face only) of the  
 person with disability.

Certificate No. \_\_\_\_\_

This is to certify that we have carefully examined Shri/Smt./Kum. \_\_\_\_\_

son/wife/daughter \_\_\_\_\_ of Shri \_\_\_\_\_

Date of Birth (DD/MM/YY) \_\_\_\_\_ Age \_\_\_\_\_ years, male/female.

Registration No. \_\_\_\_\_ permanent resident of House

No. \_\_\_\_\_ Ward/Village/Street \_\_\_\_\_ Post

Office \_\_\_\_\_ District \_\_\_\_\_ State, whose photograph is affixed above, and

am satisfied that:

(A) He/she is a case of Multiple Disability. His/her extent of permanent physical impairment/disability has been evaluated as per guideline (..... number and date of issue of the guidelines to be specified) for the disabilities ticked below, and is shown against the relevant disability in the table below:

(B)

| Sl. No. | Disability                      | Affected part of body | Diagnosis | Permanent physical impairment/ mental disability (in %) |
|---------|---------------------------------|-----------------------|-----------|---------------------------------------------------------|
| 1.      | Locomotor disability            | @                     |           |                                                         |
| 2.      | Muscular Dystrophy              |                       |           |                                                         |
| 3.      | Leprosy cured                   |                       |           |                                                         |
| 4.      | Dwarfism                        |                       |           |                                                         |
| 5.      | Cerebral Palsy                  |                       |           |                                                         |
| 6.      | Acid attack Victim              |                       |           |                                                         |
| 7.      | Low vision                      | #                     |           |                                                         |
| 8.      | Blindness                       | #                     |           |                                                         |
| 9.      | Deaf                            | €                     |           |                                                         |
| 10.     | Hard of Hearing                 | €                     |           |                                                         |
| 11.     | Speech and Language disability  |                       |           |                                                         |
| 12.     | Intellectual Disability         |                       |           |                                                         |
| 13.     | Specific learning Disability    |                       |           |                                                         |
| 14.     | Autism Spectrum Disorder        |                       |           |                                                         |
| 15.     | Mental illness                  |                       |           |                                                         |
| 16.     | Chronic Neurological Conditions |                       |           |                                                         |
| 17.     | Multiple sclerosis              |                       |           |                                                         |
| 18.     | Parkinson's disease             |                       |           |                                                         |
| 19.     | Haemophilia                     |                       |           |                                                         |
| 20.     | Thalassemia                     |                       |           |                                                         |
| 21.     | Sickle Cell disease             |                       |           |                                                         |

(C) In the light of the above, his/her over all permanent physical impairment as per guidelines (.....number and date of issue of the guidelines to be specified), is as follows:

In figures.....percent

In Words: -..... percentage

2. This condition is progressive/non-progressive/likely to improve/not likely to improve.

3. Reassessment of disability is :

(i) not necessary

Or

(ii) is recommended/ after..... years.....months, and therefore this certificate shall be valid till..... (DD)/(MM)/(YY)

@ - eg. Left/Right/both arms/legs

# - eg. Single eye /both/eyes

€ - eg. Left/Right/both ears

4. The applicant has submitted the following document as proof of residence: -

| Nature of Document | Date of Issue | Details of authority issuing certificate |
|--------------------|---------------|------------------------------------------|
|                    |               |                                          |

5. Signature and seal of the Medical Authority

|                         |                         |                                  |
|-------------------------|-------------------------|----------------------------------|
|                         |                         |                                  |
| Name and Seal of Member | Name and Seal of Member | Name and Seal of the Chairperson |

Signature/thumb  
impression of the  
person in Whose  
favour certificate of  
disability is issued

Form-VII  
Certificate of Disability  
(In cases other than those mentioned in Forms V and VI)  
(Name and Address of the Medical Authority issuing the Certificate)  
[See rule 18(1)]

Recent Passport Size Attested  
Photograph (Showing face  
only) of the person with  
disability

Certificate No. \_\_\_\_\_

Date: \_\_\_\_\_

This is to certify that I have carefully examined  
Shri/Smt/Kum \_\_\_\_\_ son/Wife/daughter of Shri \_\_\_\_\_

Date of Birth (DDD/MM/YY) \_\_\_\_\_ Age \_\_\_\_\_ years,

male/female \_\_\_\_\_ Registration No. \_\_\_\_\_ permanent resident of House No. \_\_\_\_\_

\_\_\_\_\_ Ward/Village/Street \_\_\_\_\_ Post Office \_\_\_\_\_

District \_\_\_\_\_ State \_\_\_\_\_, whose photograph is affixed above, and am satisfied that  
he/she is a case of \_\_\_\_\_ Disability. His/her extent of percentage physical  
impairment/disability has been evaluated as per guidelines (.....number and date of issue of  
the guidelines to be specified) and is shown against the relevant disability in the table below:

| Sl. No. | Disability                      | Affected part of body | Diagnosis | Permanent physical impairment/ mental disability (in %) |
|---------|---------------------------------|-----------------------|-----------|---------------------------------------------------------|
| 1.      | Locomotor disability            |                       |           |                                                         |
| 2.      | Muscular Dystrophy              |                       |           |                                                         |
| 3.      | Leprosy cured                   |                       |           |                                                         |
| 4.      | Cerebral Palsy                  |                       |           |                                                         |
| 5.      | Acid attack Victim              |                       |           |                                                         |
| 6.      | Low vision                      | #                     |           |                                                         |
| 7.      | Deaf                            | €                     |           |                                                         |
| 8.      | Hard of Hearing                 | €                     |           |                                                         |
| 9.      | Speech and Language disability  |                       |           |                                                         |
| 10.     | Intellectual Disability         |                       |           |                                                         |
| 11.     | Specific learning Disability    |                       |           |                                                         |
| 12.     | Autism Spectrum Disorder        |                       |           |                                                         |
| 13.     | Mental illness                  |                       |           |                                                         |
| 14.     | Chronic Neurological Conditions |                       |           |                                                         |
| 15.     | Multiple sclerosis              |                       |           |                                                         |
| 16.     | Parkinson's disease             |                       |           |                                                         |
| 17.     | Haemophilia                     |                       |           |                                                         |
| 18.     | Thalassemia                     |                       |           |                                                         |
| 19.     | Sickle Cell disease             |                       |           |                                                         |

(Please strike out the disabilities which are not applicable.)

2. The above condition is progressive/non-progressive/likely to improve/ not likely to improve.

3. Reassessment of disability is :  
(i) not necessary

Or

(ii) is recommended/ after..... years.....months, and therefore this certificate shall be valid till..... (DD)/(MM)/(YY)

@ - eg. Left/Right/both arms/legs

# - eg. Single eye /both/eyes

€ - eg. Left/Right/both ears

4. The applicant has submitted the following document as proof of residence: -

| Nature of Document | Date of Issue | Details of authority issuing certificate |
|--------------------|---------------|------------------------------------------|
|                    |               |                                          |

(Signature and seal of Authorised Signatory of  
Notified Medical Authority)  
(Name and Seal)

Countersigned  
(Countersignature and seal of the  
Chief Medical Officer/Medical Superintendent/  
Head of Government Hospital, in case the  
Certificate is issued by a medical  
Authority who is not a government  
Servant (With Seal))

Signature/Thumb impression  
of the person in whose favour  
certificate of disability  
certificate is issued.

Note: In case this certificate is issued by a medical authority who is not a government servant, it shall be valid only if countersigned by the Chief Medical Officer of the District.

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**Certificate for person with specified disability covered under the definition of Section 2 (s) of the RPwD Act, 2016 but not covered under the definition of Section 2(r) of the said Act, i.e. persons having less than 40% disability and having difficulty in writing.**

This is to certify that, we have examined Mr/Ms/Mrs .....(name of the candidate), S/o /D/o ....., a resident of.....(Vill/PO/PS/District/State), aged.....years, a person with ..... (nature of disability/condition), and to state that he/she has limitation which hampers his/her writing capability owing to his/her above condition. He/she requires support of scribe for writing the examination.

2. The above candidate uses aids and assistive device such as prosthetics & orthotics, hearing aid (name to be specified) which is /are essential for the candidate to appear at the examination with the assistance of scribe.

3. This certificate is issued only for the purpose of appearing in written examinations conducted by recruitment agencies as well as academic institutions and is valid upto \_\_\_\_\_ (it is valid for maximum period of six months or less as may be certified by the medical authority)

Signature of medical authority

| (Signature & Name)                                                                 | (Signature & Name)                                                                 | (Signature & Name)         | (Signature & Name)                    | (Signature & Name)                                 |
|------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|----------------------------|---------------------------------------|----------------------------------------------------|
| Orthopaedic / PMR specialist                                                       | Clinical Psychologist / Rehabilitation Psychologist/Psychiatrist/ Special Educator | Neurologist (if available) | Occupational therapist (if available) | Other Expert, as nominated by Chairperson (if any) |
| (Signature & Name)                                                                 |                                                                                    |                            |                                       |                                                    |
| Chief Medical Officer/Civil Surgeon/Chief District Medical Officer.....Chairperson |                                                                                    |                            |                                       |                                                    |

Name of Government Hospital/Health Care Centre with Seal

Place:

Date:

**Letter of Undertaking by the person with specified disability covered under the definition of Section 2 (s) of the RPwD Act, 2016 but not covered under the definition of Section 2(r) of the said Act, i.e. persons having less than 40% disability and having difficulty in writing.**

I \_\_\_\_\_, candidate with \_\_\_\_\_ (nature of disability/condition) appearing for the \_\_\_\_\_ (name of the examination) bearing Roll No. \_\_\_\_\_ at \_\_\_\_\_ (name of the centre ) in the District \_\_\_\_\_, \_\_\_\_\_ (name of the state). My educational qualification is \_\_\_\_\_.

1. I do hereby state that \_\_\_\_\_ (name of the scribe) will provide the service of scribe for the undersigned for taking the aforementioned examination.

2. I do hereby undertake that his qualification is \_\_\_\_\_. In case, subsequently it is found that his qualification is not as declared by the undersigned and is beyond my qualification. I shall forfeit my right to the post and claims relating thereto.

(Signature of the candidate)

(Counter signature by the parent/guardian, if the candidate is minor)

Place:

Date:

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**Letter of Undertaking for Using Own Scribe**

I \_\_\_\_\_, a candidate with \_\_\_\_\_ (name of the disability) appearing for the \_\_\_\_\_ (name of the examination) bearing Roll No. \_\_\_\_\_ at \_\_\_\_\_ (name of the centre) in the District \_\_\_\_\_, \_\_\_\_\_ (name of the State/UT). My qualification is \_\_\_\_\_.

I do hereby state that \_\_\_\_\_ (name of the scribe) will provide the service of scribe/reader/lab assistant for the undersigned for taking the aforesaid examination.

I do hereby undertake that his/her qualification is \_\_\_\_\_. In case, subsequently it is found that his / her qualification is not as declared by the undersigned and is beyond my qualification, I shall forfeit my right to the post and claims relating thereto.

(Signature of the candidate with Disability)

Place: \_\_\_\_\_

Date: \_\_\_\_\_

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**Certificate regarding physical limitation in an examinee to write**

This is to certify that, I have examined Mr./Ms./Mrs. \_\_\_\_\_ (name of the candidate with disability), a person with \_\_\_\_\_ (nature and percentage of disability as mentioned in the certificate of disability), S/o, D/o \_\_\_\_\_ a resident of \_\_\_\_\_ (Village/District/Sate) and to state that he/she has physical limitation which hampers his/her writing capabilities owing to his/her disability.

Signature

Chief Medical Officer / Civil Surgeon / Medical Superintendent of  
a Government health care Institution

Name & Designation

Name of Government Hospital / Health Care Centre with Seal

Place: \_\_\_\_\_

Date: \_\_\_\_\_

Note: Certificate should be given by a specialist of the relevant stream/disability (e.g. Visual impairment – Ophthalmologist, Locomotor disability – Orthopedic specialist / PMR).

**CSIR-IIIM**

**CERTIFICATE TO BE PRODUCED BY SERVING/RETIRED/RELEASED ARMED FORCES PERSONNEL FOR  
AVAILING THE AGE CONCESSION FOR POSTS FILLED BY DIRECT RECRUITMENT**

**Form of Certificate applicable for Released/Retired Personnel**

It is certified that Rank.....Name.....whose date of birth is..... has rendered service from..... to..... in Army, Navy/Air Force.

2. He has been released from military services:

% a) on completion of assignment otherwise than

(i) by way of dismissal, or

(ii) by way of discharge on account of misconduct or inefficiency, or

(iii) on his own request, but without earning his pension, or

(iv) he has not been transferred to the reserve pending such release

%b) on account of physical disability attributable to Military Service.

%c) on invalidment after putting in at least five years of Military service

3 . He is covered under the definition of Ex-Serviceman (Re-employment in Central Civil Services and Posts) Rules. 1979 as amended from time to time

Place: .....

Date: .....

Signature, Name and Designation of the  
Competent Authority\*\*

SEAL

% . Delete the paragraph which is not applicable.

**B. Form of Certificate for Serving Personnel**

**(Applicable for serving personnel who are due to be released within one year)**

It is certified that No. .... Rank..... Name.....is serving in the Army/Navy/Air Force from.....

2. He is due for release retirement on completion of his specific period of assignment on.....

3. No disciplinary case is pending against him.

Place: .....

Date: .....

Signature, Name and Designation of the  
Competent Authority\*\*\*

SEAL

**Candidate (Serving Personnel) furnishing certificate B as above will have to give the following undertaking:  
Undertaking to be given by serving Armed Force personnel who are due to be released within one year**

I understand that if selected on the basis of the recruitment/Examination to which this application relates, my appointment will be subject to my producing documentary evidence to the satisfaction of the appointing authority that I have been duly released/retired/discharged from the Armed Forces and that I am entitled to the benefits admissible to Ex-Servicemen in terms of the Ex-Servicemen (Re-employment in Central Civil Service and Posts) Rules, 1979, as amended from time to time.

Place:

Date:

Signature and Name of Candidate

**C. Form of Certificate applicable for Serving ECOs/SSCOs who have already completed their initial assignment and are on extended assignment**

It is certified that No..... Rank..... Name.....whose date of birth is .....serving in the Army/Navy/Air Force from.....

2. He has already completed his initial assignment of five years on.....and is on extended assignment till.....

3. There is no objection to his applying for civil employment and he will be released on three months notice on selection from the date of receipt of offer of appointment.

Place:

Date:

Signature, Name and Designation of the  
Competent Authority\*\*\*  
SEAL

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