



GOVERNMENT OF TAMIL NADU
INDIAN MEDICINE AND HOMOEOPATHY DEPARTMENT
RESEARCH AND DEVELOPMENT WING FOR ISM
Arignar Anna Government Hospital of Indian Medicine Annex Campus,
Opposite to Government Siddha Medical College Men's Hostel
Arumbakkam (PO), Chennai – 600 106.

Website: www.tnhealth.tn.gov.in

E.mail: rdwingcimh@gmail.com

Phone No. (044) 29570726

RECRUITMENT NOTIFICATION

Applications in the prescribed format are invited for temporary engagement of Assistant Research Officers (Pharmacology & Toxicology) **on consolidated pay of Rs.20,000/- pm** from the persons having qualification as specified in Col 4 for the following vacancies at Research and Development Wing for ISM, Chennai in the State of Tamil Nadu.

Sl.No (1)	Name of the Post (2)	No. of Vacancies (3)	Essential Qualification (4)	Category as per rule of Reservation (5)		
				GT	PTY	G
1.	Assistant Research Officer (Pharmacology & Toxicology)	1	M.Pharm (Pharmacology / Medical Pharmacology) or M.Sc., (Pharmacology / Medical Pharmacology); and 2 years experience in operating Laboratory instruments.			

*** The number of vacancies advertised is only an indicative number and it is liable for change till finalization of selection for appointment.**

OTHER CONDITIONS:

- i. The claims of the candidates with regard to the date of birth, educational / technical qualifications and community are generally accepted only on the information furnished by them in their application, without physical verification of their claims. Their candidature will be provisional and subject to the Department satisfying itself, about their age, educational/technical qualifications, community etc. with reference to the certificates and supportive documents submitted with their application. The candidature is therefore, provisional at all stages and the Department reserves the right to reject any candidature at any stage, even after the selection has been made.
- ii. Persons with required qualification whether registered in employment exchange or otherwise are eligible to apply. Candidates having required age, educational qualification and required experience with any priority or if they have not come under any priority may also apply.
- iii. If priority candidate as per communal rotation having essential qualification as mentioned herein are not available, the non- priority eligible candidates as per communal rotation will be considered.
- iv. If any application received without complete details as called for and without any copy of supportive documents will not be entertained and those applications will be summarily rejected without any further notice.

ABBREVIATION	DETAIL	ABBREVIATION	DETAIL
GT	General turn	PTY	Priority
SCA	Scheduled caste Arunthathiar	G	General
MBC& DNC	Most Backward Class/ Denotified Community	W	Woman
BC	Backward Class	DW	Destitute Widow
SC	Scheduled Caste	ST	Scheduled Tribe

2. Nature of Engagement:

The engagement of Assistant Research Officers for Research and Development Wing for ISM, Chennai is purely on temporary basis with consolidated pay and it will not confer any right to the individual for the appointment on regular time scale of pay.

3. IMPORTANT DATES:

Date of Notification : **10.08.2023**

Last date for submission of Application : **25.08.2023**

4. RULE OF RESERVATION:

The rule of reservation is applicable as per the rules in force.

5. AGE (as on 01.07.2023):

Sl. No.	Category	Minimum Age (should have completed) (in years)	Maximum Age (in years) SC/ST/SCA/BC/BCM/MBC&DNC
a	For all categories	18	General - 32 BC; MBC & DNC - 34 SC, SCA, ST - 37

6. PROCEDURE OF SELECTION:

“Selection will be made based on the marks scored by the candidates in their academic qualification for the post of ASSISTANT RESEARCH OFFICERS duly following the rules of reservation and communal rotation issued by the Government of Tamil Nadu and also follow the instructions issued in G.O.(D).No.816, Health and Family Welfare (IM1-2) Dept., Dated 14.09.2020 and G.O. (D).No.674, Health and Family Welfare (IM2-1) Department, Dated 21.06.2023. There will be no written test for the posts.”

7. HOW TO APPLY:

a. Candidates should download the application appended herewith and submit **filled in application with required certificates in complete shape to the “Chief Scientific Officer/Director, Research and Development Wing for ISM, Indian Medicine and Homoeopathy Department, Arumbakkam, Chennai - 106 (Opposite to siddha Men’s Hostel)” on or before 5.00 PM on 25.08.2023 by post only. Belated applications and soft copy of application sent through mail id will not be entertained at any cost. Incomplete applications will be summarily rejected without any notice.**

- b. A valid e-mail ID and Mobile Number is mandatory and it should be mentioned in their application for future correspondence. Email ID and the given mobile number should be kept active till the declaration of selection of candidates. Intimation regarding certificate verification etc. will be sent only through the registered e-mail ID.
- c. Please note that all the particulars mentioned in the application including Name of the Candidate, Post Applied, Communal Category, Date of birth, Address, Email ID, etc. will be considered as final and no modifications will be allowed after applying. Candidates are requested to fill in the application form with utmost care as no correspondence regarding change of details will be entertained.

Note:

- i. Candidates are advised in their own interest to apply in time and submit their application before the closing date and not to wait till the last date to avoid rejection.
- ii. This office will not be responsible for any delayed submission.
- iii. Under no circumstances, a candidate should share/mention e-mail ID or Mobile Number with any other person. In case a candidate does not have a valid personal e-mail ID, they should create a new e-mail ID before applying and must maintain that email account.
- iv. Candidates should carefully fill in the details in the Application at the appropriate places and also advised to verify each and every particular filled in their application. The name of the candidate or his /her father/husband's name etc. should be furnished correctly in the application as it appears in the certificates. Any change/alteration found may disqualify the candidature.

8. LIST OF DOCUMENTS TO BE PRODUCED AT THE TIME OF CERTIFICATE VERIFICATION

- a. Evidence of Date of Birth (Birth Certificate / SSLC)
- b. Evidence and Mark sheet of Educational qualification (SSLC, HSC and Degree Certificate and Post Graduate Certificate). Mark sheets of UG/PG Degree should also be enclosed.
- c. Evidence of Tamil qualification (viz., SSLC CERTIFICATE).
- d. Community certificate from the competent authority (Permanent Community Certificate)
- e. Certificate of character and conduct issued by Group A or Group B Officer on or after issue of the current notification.
- f. Certificate of character and conduct issued by the Head of the Institution in which he / she last studied / Local body authorities.
- g. Differently abled certificate issued by the competent authority (if applicable).
- h. A Declaration should be submitted with the application form as in this notification
- i. Recent passport size colour photograph with self-attestation should be affixed in the application form.
- j. Any one of the photo ID card issued by a Government Authority (other than PAN card), depicting the Address for communication or permanent Address furnished in the application.
- k. Destitute widow certificate (if applicable). – Annexure III
- l. In respect of Ex-Servicemen they have to produce the Discharge Certificate, PPO No., in case if he is already Discharged. If the candidate is a serving personnel to be discharged within one year from the last date of receipt of the application of this notification, he has to produce an undertaking given by the candidate in Annexure I & Form of Certificate for serving personnel in Annexure II of this notification.(if applicable).

9. COMMUNICATION WITH THE O/o Research & Development Wing for ISM, CIM&H, Chennai:

- i. Any communication intended for the office must be made in writing and addressed only to the Chief Scientific Officer/Director, Research and Development Wing for ISM, Indian Medicine and Homoeopathy Department, Opposite to Government Siddha Medical College Men's Hostel, Arumbakkam, Chennai – 106.
- ii. Communications seeking reasons for non-selection and other qualifications will receive no attention. Requests for furnishing causes of failure (non-selection) will not be complied with.
- iii. Communication in the name of pleader or agent will not be entertained.
- iv. Any claim relating to the selection should be received within 30 days from the date of announcement of selection. Claims received thereafter will not be considered.

10. CERTIFICATE OF PHYSICAL FITNESS:

Candidates provisionally selected for appointment to the posts will be required to produce a certificate of physical fitness including Vision Certificate in the prescribed form.

16. IF DIFFERENTLY ABLED 17. % OF DISABILITY 18. NATURE OF DISABILITY

YES	NO
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19. DISABILITY CERTIFICATE No. ----- DATE: -----

20. DISABILITY CERTIFICATE ISSUING AUTHORITY -----

21. IF DESTITUTE WIDOW 22. CERTIFICATE NO & DATE 23. ISSUING AUTHORITY

YES	NO
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24. EX- SERVICE MAN 25. ENROLLMENT NO 26. ENROLLMENT DATE ____

YES	NO
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27. PRIPORITY – IF ANY 28. CERTIFICATE NO & DATE 29. ISSUING AUTHORITY

YES	NO
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30. MARK STATEMENTS (Self attested Xerox copies must be enclosed for all mark statements)

A) SSLC

I. REG.NO	II. CERTIFICATE NO.	MONTH & YEAR OF PASSING

SUBJECT	MAXIMUM MARKS	MARKS OBTAINED	NO. OF ATTEMPT
TAMIL			
ENGLISH			
MATHS			
SCIENCE			
SOCIAL SCIENCE			
TOTAL			

B) HSC

SUBJECT	REG.NO	CERTIFICATE NO.	MONTH & YEAR OF PASSING	MARKS OBTAINED	MAXIMUM MARK	NO. OF ATTEMPT

C) U.G.DEGREE

SUBJECT	REG.NO	CERTIFICATE NO.	MONTH & YEAR OF PASSING	MARKS OBTAINED	MAXIMUM MARK	NO. OF ATTEMPT

D) P.G.DEGREE

SUBJECT	REG.NO	CERTIFICATE NO.	MONTH & YEAR OF PASSING	MARKS OBTAINED	MAXIMUM MARK	NO. OF ATTEMPT

31. EXPERIENCE IN CHRONOLOGICAL ORDER:

NAME OF THE INSTITUTION/LABORATORY	PERIOD		TOTAL PERIOD OF EXPERIENCE	FIELD OF EXPERIENCE
	FROM	TO		

32. HAVE YOU ENCLOSED THE ALL SUPPORTING DOCUMENTS:

YES	NO
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Signature of the Candidate

PLACE:

DATE:

DECLARATION BY THE APPLICANT

1. I have gone through the instructions to the Applicants and the notification for this recruitment before filling up the application form and I undertake to abide by the same.
2. The information furnished by me in this application are found correct.
3. I am aware of the fact that the information furnished in this application cannot be edited after submission of this application.
4. I will not make any request to change any details in the application on later dates.
5. I am also aware that my application / candidature is liable for rejection at any stage of the selection process, if any of the details is found to be wrong in this application.
6. **I enclose the copies of academic certificates and certificate in support of my experience. I am fully aware that without the copies of academic and experience certificate, my application will not be entertained and summarily rejected without giving further notice.**
7. I hereby declare that all the particulars furnished in the application are true, correct and complete to the best of my knowledge and belief. In the event of any information being found false or incorrect or ineligibility being detected before or after recruitment or at any stage, any action can be taken against me by the authorities concerned including rejection of my application.
8. I hereby declare that I will not be a party to any kind of canvassing on my behalf.
9. I further declare that I fulfill all the eligibility conditions prescribed for this appointment,
10. I declare that I possess the Physical standards prescribed for the post which I am now applying for.
11. I certify that I have not been disqualified by any other recruiting agency.
12. I hereby declare that no criminal case has been registered against me.
13. I am fully aware that no individual communication regarding the date and time of interview, certificate verification will be sent to me. I am also aware that the schedule of interview, certificate verification will be made available on the website and I have to know the above details on receipt of email/SMS alerts to this effect.
14. I have thoroughly checked all the details furnished in this application and I have furnished all information in this application correctly, without any omission due to carelessness or typographical error.
15. I declare that I do not have more than one living spouse / I am unmarried.

Signature of the Candidate

PLACE:

DATE:

ANNEXURE – I

**FORM OF UNDERTAKING AND CERTIFICATE TO BE FURNISHED BY THE
SERVING PERSONNEL**

I hereby accept that, if selected on the basis of the recruitment / examination to which this application relates, I will produce documentary evidence to the satisfaction of the appointing authority that I have been duly released / retired / discharged from the Armed forces and I am entitled to the benefits admissible to Ex – servicemen given under rule 63 (2) of Tamil Nadu Government Servants (Conditions of service) Act, 2016 and as amended from time to time.

Place:

Signature of the candidate.

Annexure - II

Form of certificate for serving personnel

I hereby certify that, according to the information available with me

(No) (Rank) (Name) is

Due to complete the specified term of his engagement with the Armed Forces on the

(Date)

Place:

Signature of the Commanding officer

Date:

Annexure – III

CERTIFICATE TO BE PRODUCED BY THE CANDIDATES WHO CLAIMS CONCESSION UNDER DESTITUTE WIDOW

SCHEDULE – X

[See section 20 (8) and 26 (3)]

- (1) Name of the individual:
- (2) Full Postal Address:
- (3) Details of job held, if any:
- (4) Particulars of her children, if any:
- (5) Name and last occupation of her late husband:
- (6) Date of demise of her husband:
- (7) Monetary benefits received after her husband's death by way of family pension, Insurance, etc., if any:
- (8). Details of Properties if any immovable and movable: left behind by him
- (9). Present monthly income—
 - (a) From salaries/wages:
 - (b) From family pension:
 - (c) From private properties:
 - (d) Rents received
 - (e) From private practice:
 - (f) Other sources, if any:
 - (g) Total:
10. Whether living alone or living with her husband's parents/in-laws/ parents/brother (s):

11. Whether she satisfies the definition of the term “Destitute Widow” as defined in section 20(8) and 26 of this Act:

Certified that I have verified the particulars furnished by the individual and satisfied myself as to the correctness of her claim with reference to the definition of the term “Destitute Widow” in section 20(8) and 26 of this Act.

Certificate Reference No.:

Signature:

Place:

Name:

Date:

Designation:

Revenue Divisional Officer/ Assistant Collector/Sub-Collector.

Explanation- The above certificate should be issued only by the Revenue Divisional Officer or the Assistant Collector or the Sub-Collector concerned.