

राष्ट्रीय खेल विश्वविद्यालय, इम्फाल, मणिपुर (केन्द्रीय विश्वविद्यालय) भारत सरकार,युवा कार्यक्रम एवं खेल मंत्रालय NATIONAL SPORTS UNIVERSITY, IMPHAL, MANIPUR (A Central University) Government of India, Ministry of Youth Affairs and Sports



F.No. 34/NSU/ESTB/RECRUIT(NT)/2022-525

Date: 13th May 2022

ADVERTISEMENT Advt.No.02/2022

<u>Applications for the post of Section Officer, Private Secretary and Physiotherapist</u> <u>on deputation.</u>

Applications are invited from the eligible candidates for filling up 01 (one) post of Section Officer,01(one) post of Private Secretary and 01(one) post of Physiotherapist on deputation in the National Sports University, Imphal, Manipur.

For further details such as application proforma, qualifications, emoluments, terms of appointment etc. please visit University website: <u>http://www.nsu.ac.in</u>.

Duly completed application form in all respects along with self-attested scanned copies of testimonial, certificates, supporting documents etc. should reach to the Registrar, National Sports University,2nd Floor,Olympic Bhavan,Khuman Lampak Sports Complex ,Imphal-795001 by post or email to : <u>cell-recruitment@nsu.ac.in</u> on or before **20th June 2022**.

Any queries regarding the application may be addressed to the Registrar, NSU, Imphal at registrar@nsu.ac.in.

Date:13.05.2022 Place: Imphal sd/-Registrar



राष्ट्रीय खेल विश्वविद्यालय, इम्फाल, मणिपुर

भारत सरकार, युवा कार्यक्रम एवं खेल मंत्रालय (केन्द्रीय विश्वविद्यालय) NATIONAL SPORTS UNIVERSITY, IMPHAL, MANIPUR



(A Central University) (Government of India, Ministry of Youth Affairs and Sports)

F.No.34/NSU/ESTB/Recruit (NT)/2022

Date: 17th May 2022

ADVERTISEMENT

Advt. No. 2/2022

Advertisement for the post of Section Officer, Private Secretary and Physiotherapist on <u>deputation</u>

Applications are invited from the eligible candidates for filling up the following posts on deputation in the National Sports University, Imphal from persons possessing qualifications and experience given below in the prescribed proforma:

| 1. | Name of the post | Section Officer |
|----|-----------------------------------|--|
| | Pay Level | Level 7 (Rs.44900-142400) of 7 th CPC Pay Matrix. |
| | Eligibility/Essential Criteria | Officer holding analogous post or with three years regular service in Level 6 or eight years as UDC in Level 4 in any Central / State Govt. or Central/State University or CPSU / PSU or other Central/State Autonomous Institutions and possessing educational qualifications as given below: Bachelor's Degree in any discipline from any recognised Institute/University. ii. Proficiency in Computer Operation, noting and drafting. |

| 2. | Name of the post | Private Secretary |
|----|-----------------------------------|---|
| | Pay Level | Level 7 (Rs.4490-142400) of 7th CPC Pay Matrix. |
| | Eligibility/Essential Criteria | Person holding analogous post or with 3 years regular service as Personal Assistant in Level-6 of any Central / State Govt. Or Central/State University or CPSU /PSU or other Central/State Autonomous bodies and fulfilling the educational qualifications as given below: Essential: i. Bachelor's Degree in any discipline from any recognised Institute/University. ii. Knowledge of Computer Applications. Desirable: i. English/Hindi Stenography Speed: 120 wpm in English and good communication skill. |

| 5 | Name of the post | Physiotherapist |
|---|--------------------------------|--|
| | Pay Level | Level 6 (Rs. 35400-112400) of 7th CPC Pay Matrix. |
| | Eligibility/Essential Criteria | Holding analogous post at a government hospital or hospital recognised by the government or private hospital with 100 beds and possessing educational qualifications as given below: Essential: Bachelor's Degree in Physiotherapist from a recognised University. |
| | | Desirable: |
| | | Master Degree in Physiotherapy in any branch from a recognised University or Institute. |

How to apply:

The duly completed application form in all respects along with self-attested scanned copy of testimonial/certificates and forwarding from the Cadre Controlling Authority in the prescribed proforma, should be sent by post addressing to: The Registrar, National Sports University,2nd floor, Olympic Bhawan, Khuman Lampak Sports Complex, Imphal, Manipur, 795001 or email to <u>cell-recruitment@nsu.ac.in</u> so as to reach/received on or before **20th June 2022.**

Instructions:

- i. NSU reserves the right to fill or not to fill the above post.
- ii. The candidates are requested to submit their application in the prescribed proforma (available on NSU's website: <u>www.nsu.ac.in</u>) through proper channel accompanied with an authenticated statement showing the ACR/APARs Grading of preceding five years duly signed and stamped by the Competent Authority of the concerned office. Candidates should also enclose self-attested copies of documents in support of educational and other qualifications and experience etc. The applications without these documents will be rejected summarily.
- iii. The last date for submission of application by post or email is **20th June 2022**.
- iv. It shall be the responsibility of the candidate to assess his own eligibility for the post for which he is applying in accordance with the prescribed qualifications, experience, etc., and submit his application duly filled-in, along with the desired information and documents as per the advertisement. Suppression of factual information, supply of fake documents, providing false or misleading information or canvassing in any manner on the part of the candidates shall lead to his disqualification.

- v. An appointment on deputation shall be initially for a period of three years which may be extended further at the discretion of the Competent Authority subject to satisfactory performance and after obtaining the consent of the parent department. The University, however, shall have the right to repatriate the incumbent at any time even before the prescribed period in case his performance, integrity or conducts are found to be unsatisfactory at any stage, in the opinion of the Competent Authority.
- vi. The person appointed shall be governed by the Act/ Statutes/ Ordinances/ Rules of the University and also the CCS (Conduct) Rules, 1964, CCS (CCA) Rule,1965 or any other rules of the Government of India, as amended from time to time wherever applicable.
- vii. The candidate shall bring all original certificates relating to his age, qualifications, experience, etc., at the time of tests/interview. In case the candidate fails to submit the original documents for verification of the certified photocopies of the enclosures to his application, he may not be allowed to appear at the tests/interview and his candidature may be treated as cancelled without any further communication in this regard.
- viii. Candidates are requested to check the University Website regularly for the latest updated information and further announcements and changes.
 - ix. Any queries regarding the application may be address to the Registrar, NSU, Imphal at registrar@nsu.ac.in

Sd/-

Registrar

PROFORMA OF APPLICATION

Attach Passport Size Photo.

| 1. | Name of the post applied for | : |
|-----|--|---|
| 2. | Name and Address (in BLOCK letters) | : |
| 3. | Date of Birth | : |
| 4. | Age as on last date of submission of application | : |
| 5. | Date of superannuation from the present service | : |
| 6. | Gender | : |
| 7. | Correspondence address | : |
| 8. | i) Mobile No. | : |
| | ii) Email address | : |
| 9. | Name and address of the organisation where | : |
| 10. | presently working Education Qualification | : |

11. Details of Employment, in chronological order. Enclose a separate sheet duly authenticated by your signature.

| SI.No. | Office/ Institutions | Post held | From | То | Pay Level and Basic Pay held on regular | Nature of Duties (in details) |
|--------|----------------------|-----------|------|----|--|----------------------------------|
| | | | | | | |

:

:

12. Nature of present employment

i.e. Temporary or Quasi-Permanent or Permanent

13. Present Pay Level and Basic Pay

14. In case the present employment

is held on deputation/contract

basis, please state:

- a. The date of initial appointment
- b. Period of appointment on deputation/contract
- c. Name of the parent office/organization to which you belong

:

:

:

15. Additional details about present employment. Please state whether working under (indicate the name of your employer against the relevant column) :

:

:

:

- Central Govt.:State Govt.:Autonomous Organization:
- Government Undertaking

Universities

Others

:

16. Are you in 7th CPC Revised Scale of :

Pay? If yes, give the date from

which the revision took place also

indicate the pre-revised Scale

- 17. Total emoluments per month now drawn:
- 18. Language known
- 19. Additional information, if any, which you would like to mention, in support of your suitability for the post (This among other thing may provide information with regard to (i) additional academic qualifications (ii) professional training and (iii) work experience over and above prescribed in the vacancy Circular/Advertisement) (Note: Enclose a separate sheet, it the space is insufficient):
- 20. Remarks/Achievements (if any):

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DECLARATION

I solemnly declare that the details given above in the application form are correct to the best of my knowledge and belief. In case any of the details in the application from are found false at a later stage, my candidature / appointment may be cancelled / withdrawn.

(Signature of the Candidate)

| Date: | |
|---------|--|
| Place : | |

(FOR USE OF FORWARDING OFFICE)

It is certified that the details provided by the applicant as above are correct as per our records. No Vigilance / disciplinary case is either pending or contemplated against the officer and no penalty, major or minor, was imposed on the officer during the last 10 years and his integrity is beyond doubt.

If selected, the individual will be relieved immediately.

2. The officer's CR Dossier in original /photocopies of the ACRs/APARs for the last 5 years duly attested are enclosed.

| (Signature of the Head of the office) |
|---------------------------------------|
| Name |
| Designation |
| Seal of the office |

Date: _____ Place: _____

(* Note: If ACRs/APARs not adopted/not relevant the employer has to categorically certify the same in lieu of sending ACRs/APARs)