

JAI PRAKASH NARAYAN APEX TRAUMA CENTRE AIIMS, NEW DELHI

VACANCY

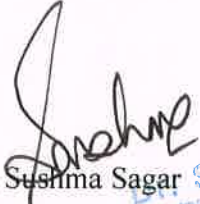
For the temporary posts at JPNATC, AIIMS in ICMR funded Research Project entitled: -
“Impact of rTMS versus drug therapy on phantom limb pain in lower limb amputation
patients: A Randomized control trial”

Advertisement Date: 22-09-2021

S. No.	Name of the Post	Eligibility	Age Limit
1.	Junior Research Fellow (JRF)	Essential Qualification: Master degree in Psychology with NET qualified. Desirable: - MPhil or Research experience.	Upto 30 years

Age Relaxation for *SC, ST, OBC candidates as per GOI rules.

Applications should be submitted in person/by e-mail (tsjpnatc@gmail.com)/by post, along with a covering letter specifying the name of the post applied on the envelope to the following address:


Dr. Sushma Sagar
Principal Investigator,
Room No. 229, 2nd Floor
Division of Trauma Surgery & Critical Care
JPN Apex Trauma Centre, AIIMS, New Delhi

Sushma Sagar
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Division of Trauma Surgery & Critical Care
JPN Apex Trauma Centre
AIIMS, New Delhi-110029

Important notes: -

- 1) Application must be filled in the prescribed format (Attached along with advertisement).
- 2) Incomplete applications or applications without prescribed format or received after due date will not be considered.
- 3) Only shortlisted candidates will be invited for interview through email or telephone. **No TA/DA will be given for the same.**
- 4) No enquiries shall be entertained in this regard after due date.
- 5) Written examination might be conducted for the initial round of interview.
- 6) Last date of receiving the Application is 20-10-2021 till 05 PM.

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FORMAT FOR APPLICATION

- 1) Name of the Post
- 2) Name of the Candidate
- 3) Date of Birth
- 4) Age
- 5) Category (General/OBC/SC/ST/PH)
- 6) Permanent Address
- 7) Address of Correspondence
- 8) Email Address
- 9) Phone No. Mobile _____ Landline No. _____
- 10) Qualification from High School and above

S. No.	Qualification	Name of the Board/University	Year of Passing	Percentage

11) Experience

S. No.	Post	Name of the Institution	From (Date/month/year)	To (Date/Month/Year)	Total Experience	Duties/Responsibilities

I hereby declare that above information provided by me is correct to my knowledge and belief.

.....
(Signature of the Candidate)

Enclosures attached: -

- 1.
- 2.
- 3.
- 4.