

**ANNEXURE- I**

<b>Sl. No.</b>	<b>Name of the post</b>	<b>Educational Qualification</b>	<b>Experience</b>	<b>Upper Age limit</b>	<b>Pay Matrix</b>
1	PROFESSOR OF NEUROSURGERY	M.Ch Neurosurgery / Specialty Board of Neurosurgery (USA) or equivalent qualification from recognized University / Institution.	9 years total teaching or research experience in a recognized Institution in the subject of specialty after obtaining the qualifying degree as above	50 years	Level - 14A (Rs.1,68,900-2,20,400/-)  Initial Pay in the Pay Matrix Rs.1,68,900/- (Plus NPA)
1A	ADDITIONAL PROFESSOR OF NEUROSURGERY (LOWER CADRE)	M.Ch Neurosurgery / Specialty Board of Neurosurgery (USA) or equivalent qualification from recognized University / Institution.	6 years total teaching or research experience in a recognized Institution in the subject of specialty after obtaining the qualifying degree as above	50 years	Level - 13A2+ (Rs.1,48,200-2,11,400/-)  Initial Pay in the Pay Matrix Rs.1,48,200/- (Plus NPA)
2	ASSISTANT PROFESSOR OF NEUROSURGERY	M.Ch Neurosurgery / Specialty Board of Neurosurgery (USA) OR equivalent qualification from a recognized University/Institution	-	50 years	Level – 12 (Rs.1,01,500 - 1,67,400/-)  Initial Pay in the Pay Matrix Rs.1,01,500/- (Plus NPA)
3	ASSOCIATE PROFESSOR OF NEUROLOGY	DM Neurology / Specialty Board of Neurology (USA) OR equivalent qualification from a recognized University / Institution	3 years total teaching or research experience in a recognized Institution in the subject of specialty after obtaining the qualifying degree as above	50 years	Level - 13A-1 (Rs.1,38,300-2,09,200/-)  Initial Pay in the Pay Matrix Rs.1,38,300/- (Plus NPA)
3A	ASSISTANT PROFESSOR OF NEUROLOGY (LOWER CADRE)	DM Neurology / Specialty Board of Neurology (USA) OR equivalent qualification from a recognized University / Institution	-	50 years	Level – 12 (Rs.1,01,500-1,67,400/-)  Initial Pay in the Pay Matrix Rs.1,01,500/- (Plus NPA)

Sl. No.	Name of the post	Educational Qualification	Experience	Upper Age limit	Pay Matrix
4	ASSISTANT PROFESSOR OF NEUROLOGY	DM Neurology / Specialty Board of Neurology (USA) OR equivalent qualification from a recognized University / Institution	-	50 years	Level – 12 (Rs.1,01,500-1,67,400/-)  Initial Pay in the Pay Matrix Rs.1,01,500/- (Plus NPA)
5	ASSOCIATE PROFESSOR OF NEUROANAESTHESIA & NEUROCRITICAL CARE	MD Anaesthesia /MS Anaesthesia / Specialty Board of Anaesthesia (USA) or equivalent with training in Neuro Anaesthesia	6 years total teaching or research experience in a recognized Institution in the subject of speciality after obtaining the qualifying degree as above	50 years	Level - 13A-1 (Rs.1,38,300-2,09,200/-)  Initial Pay in the Pay Matrix Rs.1,38,300/- (Plus NPA)
5A	ASSISTANT PROFESSOR OF NEUROANAESTHESIA & NEUROCRITICAL CARE (LOWER CADRE)	MD Anaesthesia /MS Anaesthesia / Specialty Board of Anaesthesia (USA) or equivalent with training in Neuro Anaesthesia	3 years total teaching or research experience in a recognized Institution in the subject of speciality after obtaining the qualifying degree as above	50 years	Level – 12 (Rs.1,01,500-1,67,400/-)  Initial Pay in the Pay Matrix Rs.1,01,500/- (Plus NPA)
6	ASSISTANT PROFESSOR OF NEUROANAESTHESIA AND NEURO CRITICAL CARE	MD Anaesthesia /MS Anaesthesia / Specialty Board of Anaesthesia (USA) or equivalent with training in Neuroanaesthesia	3 years teaching or research experience in a recognized Institution in the subject of specialty after obtaining the qualifying degree as above	50 years	Level – 12 (Rs.1,01,500 - 1,67,400/-)  Initial Pay in the Pay Matrix Rs.1,01,500/- (Plus NPA)
7	ASSISTANT PROFESSOR OF NEURO IMAGING & INTERVENTIONAL RADIOLOGY	MD Radiology/ MS Radiology/ MD Specialty Board of Radiology (USA), FFR OR equivalent with training in Neuro Radiology for two years OR DM Neuro Radiology	3 years teaching or research experience in a recognized Institution in the subject of specialty after obtaining the qualifying degree of MD	50 years	Level – 12 (Rs.1,01,500 - 1,67,400/-)  Initial Pay in the Pay Matrix Rs.1,01,500/- (Plus NPA)

Sl. No.	Name of the post	Educational Qualification	Experience	Upper Age limit	Pay Matrix
8	ASSISTANT PROFESSOR OF NUCLEAR MEDICINE (Under the Department of NI & IR)	<p>1. Medical qualification included in schedule II or part II of the III schedule of Indian Medical Council Act of 1956 (Candidates possessing the qualification included in part II of the third scheduled should also fulfill the criteria specified in section 13(3) of the act).</p> <p>2. A post graduate qualification eg. MD in Nuclear Medicine or a qualification recognized equivalent thereto</p>	3 years teaching or research experience in a recognized Institution in the subject of specialty after obtaining the qualifying degree of MD in Nuclear Medicine or a qualification recognized equivalent thereto	50 years	<p>Level – 12 (Rs.1,01,500 - 1,67,400/-)</p> <p>Initial Pay in the Pay Matrix Rs.1,01,500/- (Plus NPA)</p>
9	ASSISTANT PROFESSOR OF CHILD & ADOLESCENT PSYCHIATRY	MD in Psychiatry/ MD in Psychological Medicine OR equivalent qualification from a recognized University/Institution	3 years total teaching or research experience in a recognized Institution in the subject of specialty after obtaining the qualifying degree as above.	50 years	<p>Level – 12 (Rs.1,01,500 - 1,67,400/-)</p> <p>Initial Pay in the Pay Matrix Rs.1,01,500/- (Plus NPA)</p>
10	ASSISTANT PROFESSOR OF CLINICAL PSYCHOLOGY	<p>a) I or II Class M.A./M.Sc degree in Psychology</p> <p>b) M.Phil in Clinical Psychology or equivalent qualification from an Institution / University recognized by the Rehabilitation Council of India (RCI)</p> <p>c) Ph.D in Clinical Psychology from a recognized University Institution.</p>	3 years teaching or research experience in a recognized Institution in the subject of specialty after obtaining the qualifying degree as above	50 years	<p>Level – 12 (Rs.1,01,500 - 1,67,400/-)</p> <p>Initial Pay in the Pay Matrix Rs.1,01,500/-</p>

Sl. No.	Name of the post	Educational Qualification	Experience	Upper Age limit	Pay Matrix
11	ASSISTANT PROFESSOR OF NEUROPHYSIOLOGY	Medical: MD in Physiology with specialization in Neurophysiology or allied areas. Non-medical: Ph. D/ D. Sc with specialization in Neurophysiology or allied areas from a recognized University/ Institution.	3 years teaching or research experience in a recognized Institution in the subject of specialty after obtaining the qualifying degree as above.	50 years	Level – 12 (Rs.1,01,500 - 1,67,400/-) Initial Pay in the Pay Matrix Rs.1,01,500/- (Plus NPA for Medical)
12	ASSOCIATE PROFESSOR OF PSYCHIATRY	MD in Psychiatry/ MD Psychological Medicine/ or equivalent qualification from a recognized University/Institution.	6 years total teaching or research experience in a recognized Institution in the subject of specialty after obtaining the qualifying degree as above	50 years	Level – 13A-1 (Rs.1,38,300 – 2,09,200/-) Initial Pay in the Pay Matrix Rs.1,38,200/- (Plus NPA)
12A	ASSISTANT PROFESSOR OF PSYCHIATRY (LOWER CADRE)	MD in Psychiatry/ MD Psychological Medicine/ or equivalent qualification from a recognized University/Institution.	3 years total teaching or research experience in a recognized Institution in the subject of specialty after obtaining the qualifying degree as above	50 years	Level – 12 (Rs.1,01,500- 1,67,400/-) Initial Pay in the Pay Matrix Rs.1,01,500/- (Plus NPA)
13	ASSISTANT PROFESSOR OF PSYCHIATRY (UNDER CENTRE FOR ADDICTION MEDICINE)	MD in Psychiatry/ MD Psychological Medicine/ or equivalent qualification from a recognized University/Institution.	3 years total teaching or research experience in a recognized Institution in the subject of specialty after obtaining the qualifying degree as above	50 years	Level – 12 (Rs.1,01,500- 1,67,400/-) Initial Pay in the Pay Matrix Rs.1,01,500/- (Plus NPA)



ರಾಷ್ಟ್ರೀಯ ಮಾನಸಿಕ ಆರೋಗ್ಯ ಮತ್ತು ನರ ವಿಜ್ಞಾನ ಸಂಸ್ಥೆ, ರಾಷ್ಟ್ರೀಯ ವ್ಯಾಂಗ್ಯ ತೆ ಸಂಸ್ಥೆ, ಬೆಂಗಳೂರು - 29  
ರಾಷ್ಟ್ರೀಯ ಮಾನಸಿಕ ಸ್ವಾಸ್ಥ್ಯ ಏಂ ತಂತ್ರಿಕಾ ವಿಜ್ಞಾನ ಸಂಸ್ಥಾನ, ರಾಷ್ಟ್ರೀಯ ಪ್ರಮುಖಾಥಾ ಸಂಸ್ಥ, ಬೆಂಗಳೂರು - 29

NATIONAL INSTITUTE OF MENTAL HEALTH AND NEURO SCIENCES  
Institute of National Importance, under Ministry of Health and Family Welfare, Govt. of India, Bengaluru - 29

Affix recent  
passport size  
photograph duly  
signed by the  
candidate

### APPLICATION FOR THE POST OF

(in Block letters)

Advertisement No.& Date

(Name of newspaper & date in which appeared)

### TO BE SUBMITTED TO:

The Director  
National Institute of Mental Health & Neuro Sciences  
Hosur Road, Bangalore - 560 029

Application fee particulars :  
(Name & address of branch,  
Challan No. date & amount  
etc.)

Challan No. & Date	Amount	Name of the Bank & Address

### INSTRUCTIONS TO CANDIDATES:

- The application form should be filled in by the candidate's own handwriting or typed
- All the columns should be filled in and incomplete application will be rejected
- Separate application should be sent for each post
- Candidates who are in government service should apply through proper channel
- Canvassing in any form will be a disqualification
- Attested copies of educational certificates, experience certificates, age proof, caste/community certificates and testimonials/references should be attached with the application.
- If the space provided for furnishing particulars against Sl.No.1 to 27 is insufficient, full particulars may be furnished in a separate sheet of paper and enclose with the application, inserting reference to that effect.

1. Full Name (in block letters)	
2. Spouse Name Occupation Annual Income Address	

3. Father's Name Occupation Annual Income Address			
4. Mother's Name Occupation Annual Income Address			
5. Address for correspondence			
5.a. Contact Telephone/ Mobile number with STD code			
5.b. Email ID			
6. Present Residential address			
7. Permanent address			
8. Date of Birth :  Age as on last date of submission of application	Years	Months	Days
9. Gender (Male/Female)			
10. Marital Status  (Unmarried/Married/Widower/Widow/Divorce)			
11. Nationality (by birth or by domicile)			
12. Name of the State to which you belong			
13. Religion			
14. a. Whether belongs to SC/ ST/ OBC/ EWS (if so specify the category/community)			
14. b. Applying for category Notified against SC/ ST/ OBC/ EWS			

15. Whether coming under Persons with Benchmark Disability category? If so, mention the type of Disability with percentage					
16. Whether Ex-serviceman, if so, particulars of service.					
17. Are you in-service candidate, if yes give particulars of Dept/Designation/Date of joining (Central/State/Autonomous organisation/ PSU/ etc.,)					
18. Details of School/College/University studied (Starting from SSLC/10th standard & onwards)					
Name & address of the School/College	Date of joining	Date of leaving	Examination passed		
19. Educational/Technical Qualifications (Starting from SSLC/10th standard & onwards)					
Examination Passed	Name of Institution/Board / University	Duration of course	Date/month/year of passing	Class / Percentage	Subjects studied

20. Details of work experience (after possessing minimum required qualification for the post) :

Designation	From	To	Organization	Place	Nature of work
21. Languages known to speak, read & write			Speak	Read	Write
22. Knowledge of Hindi language (Examinations passed)					
23. Have you been a candidate for any post advertised by this Institute, if so give particulars and dates as to which post you applied					
24. References/Testimonials: (from two responsible persons)					
i) a) Name b) Occupation c) Address					
ii) a) Name b) Occupation c) Address					
25 . Have you been in abroad, if so give full particulars:					
a) Country/countries visited b) Period of Stay c) Date of return to India d) Purpose of visit					

<p>26. Have you done any post graduate work or published any papers &amp; papers presented at conferences, if so give full particulars.</p> <p>a) Publications :            (Journals / Papers / Chapters in Books / Books)  <b>(Please mention the numbers in figures)</b></p> <p>National</p> <p>(i) Peer reviewed :            (ii) Non peer reviewed :            (iii) Others :</p> <p>International</p> <p>(i) Peer reviewed :            (ii) Non peer reviewed :            (iii) Others :</p> <p>b) Papers presented: (at conferences)</p> <p>National :            International :</p> <p>c) Honour's &amp; Medals :</p>																									
27. Any other relevant information																									
<p>28. List of enclosures</p> <p><b>Mandatory enclosures</b></p> <ol style="list-style-type: none"> <li>1. Application Form</li> <li>2. Copies of Qualification &amp; Experience certificates</li> <li>3. Filled in Form of PUBMED Index Details</li> <li>4. Bank Account &amp; Payment details form</li> <li>5. No Objection Certificate (for Applicants working in State or Central Govt./PSU/Autonomous Bodies)</li> </ol> <p><b>Optional enclosures (as per category of applicants)</b></p> <ol style="list-style-type: none"> <li>1. Scheduled Caste Certificate</li> <li>2. Scheduled Tribe Certificate</li> <li>3. Other Backward Classes Certificate</li> <li>4. Economically Weaker Section Certificate</li> <li>5. PwBD Certificate</li> </ol>	<p><b>Please circle the appropriate one</b> </p> <table> <tbody> <tr> <td>Enclosed</td> <td>Not Enclosed</td> </tr> </tbody> </table>	Enclosed	Not Enclosed																						
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<p>i) I, hereby declare that, all the above particulars furnished by me is true to the best of my knowledge &amp; belief.</p> <p>ii) I am aware that, my application is liable to be rejected if the particulars given is incomplete or found to be incorrect.</p> <p>Place:</p> <p>Date :</p>	<p style="text-align: right;"><b>Signature of the candidate</b></p>																								

### **Details of Publications**

NAME OF THE CANDIDATE:

POST FOR WHICH APPLIED:

DETAILS OF PUBLICATIONS:

**1. Peer reviewed journals:**

a) International No.:

Author

Name of the article

Name of the journal

Year of Publication

b) National No.:

Author

Name of the article

Name of the journal

Year of publication

## **2. Chapters in Books**

Name of the article:

Name of the editor

Name of the book

Name of the Publisher

Year of Publication

## **3. Books**

Name of the author

Name of the book

Name of the publisher

Year of publication

Signature of the candidate

### **ANNEXURE -III**

## **OBC CERTIFICATE FORMAT**

## FORM OF

**Certificate to be produced by other backward Classes applying  
For appointment to posts under the Government of India**

State. 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 and Training O.M.No.36012/22/93-Estt. (SCT), Dated 8-9-1993. \*\*

Date:

Seal:

## District Magistrate Deputy Commissioner etc.

\* - 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.

Note 1: The term 'ordinarily' used here will have the same meaning as in Section 20 of the Representation of the Peoples Act, 1950.

## **ANNEXURE-IV**

### **EWS CERTIFICATE FORMAT**

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

#### **INCOME & ASSESS 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 \_\_\_\_\_  
District \_\_\_\_\_ in the \_\_\_\_\_  
State/Union 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 lakh (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.

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

Signature with seal of Office  
Name \_\_\_\_\_  
Designation \_\_\_\_\_

**Recent Passport  
size  
attested  
photograph  
of the  
applicant**

\*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.

The benefit of reservation under EWS can be availed upon production of an Income and Asset Certificate issued by a Competent Authority. The Income and Asset Certificate issued by any one of the following authorities in the prescribed format shall only be accepted as proof of candidate's claim as 'belonging to EWS': -

- (i) District Magistrate/Additional District Magistrate/ Collector/ Deputy Commissioner/Additional Deputy Commissioner/ 1st Class Stipendiary Magistrate/ Sub-Divisional Magistrate/ Taluka Magistrate/ Executive Magistrate/ Extra Assistant Commissioner
- (ii) Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate
- (iii) Revenue Officer not below the rank of Tehsildar and
- (iv) Sub-Divisional Officer or the area where the candidate and/or his family normally resides.

**ANNEXURE-V**

**NO OBJECTION CERTIFICATE FROM THE PRESENT EMPLOYER**

Ref. No: .....

Date: .....

Certified that Shri./Smt./Kum./Dr..... is a permanent / temporary employee of this Institute / Organisation / PSU / Govt. Office in the capacity of ..... since..... (Date) in pay scale of Rs. ....

His/her application is recommended and forwarded for the post. This Institute / Organisation / PSU / Government Office has no objection for applying/attending any interview to the post and he/she would be relieved in the event of selection.

Signature

Designation

(Head of the Organisation with office seal)

Place:

Date

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## **ANNEXURE - VI**

**Kindly follow the below steps to pay the application fees for the post you are applying through SB Collect:**

1. Go to **NIMHANS website, [www.nimhans.ac.in](http://www.nimhans.ac.in)**, click **Payments** Tab to reach 'SB Collect' or
2. Click or copy paste to browser the link below for directly connecting to NIMHANS-SB collect.  
**<https://www.onlinesbi.com/sbicollect/icollecthome.htm?corpID=215458>**
3. One can also select SB Collect from the Online banking page of SBI, **[www.onlinesbi.com](http://www.onlinesbi.com)**, Select State 'Karnataka', Type of Institution "Educational", search and select the Institution "**THE DIRECTOR, NIMHANS**"
4. Read Disclaimer Clause and click on check box to proceed for payment.
5. Select Payment Category "**Application for Employment**" from the drop-down menu.
6. The application page will appear, fill all the required fields on the page by manually entering the post you are applying for and the corresponding application fee and click on submit button.
7. The State Bank Collect payment verification page will appear where the payer has to click on the 'Confirm' button after verifying the payment details to proceed further.
8. The SBMOPS (State Bank Multiple Option Payment System) page is displayed with following options for payments.
  - a) Net Banking State Bank of India. Other Banks including Associate Banks.
  - b) Card Payments State Bank ATM-cum- Debit Card Other Banks Debit Cards. Credit Cards
  - c) Other Payment Modes - SBI Branch.
9. Choose the desired option and make the payment.
10. Print/Save the receipt online and attach the same with the main Application.

### **Subsequent Generation of payment receipt in SB Collect Page:**

1. Login to Online SBI, Select 'SB Collect' link on the home page, Accept the 'terms and conditions' by clicking on the box. Click on 'proceed' button. Select Payment History on the left side. Two options i.e. date range for previous payments (if you do not remember reference number) or remembered reference number. Enter the date of birth and mobile no. in boxes provided will appear. Enter the 'Start Date and End Date', Enter the text as shown in the message. Click on 'Go' button.
2. The Payment status 'Paid' will be displayed. Click on 'PRINT'
3. Payment receipt will be displayed - Click on 'PRINT'

### **Note:**

- Mandatory fields are marked with an asterisk (\*)
- Date specified (if any) should be in the format of 'ddmmyyyy'. Eg., 02082008
- For Amount fields, only numbers are allowed (fill not applicable fields with 0 (zero) and for free text fields (mandatory), following special characters are allowed: **./ @ - \_ & □** In the address field no special characters are allowed.

## ANNEXURE-VII

### APPLICANT BANK ACCOUNT DETAIL FORM

BASIC DETAILS	NAME OF THE APPLICANT	
	POST TO WHICH APPLIED	
	CITY / POSTAL CODE	
	DISTRICT	
	STATE	
	COUNTRY	
BANK DETAILS	ACCOUNT HOLDER NAME	
	BANK NAME	
	BANK ACCOUNT NUMBER	
	BANK IFSC CODE	
CONTACT DETAILS	CORRESPONDENCE ADDRESS	
	EMAIL ID	
	MOBILE NUMBER	

- 1) I hereby declare that, all the above particulars furnished by me are true to the best of my knowledge & belief.
- 2) I am aware that, my application is liable to be rejected if the particulars given are incomplete or found to be incorrect.

Applicant Signature

# PAYMENT DETAILS MADE BY THE CANDIDATE

NAME OF THE APPLICANT	
POST APPLIED FOR	
MODE OF PAYMENT	<ul style="list-style-type: none"> <li>a) Digital Payment</li> <li>b) BHIM App</li> <li>c) Debit Card</li> <li>d) Credit Card</li> <li>e) Wallet</li> <li>f) IMPS</li> <li>g) Net Banking</li> <li>h) Others - .....</li> </ul> <p>Kindly choose the above option.</p>
TRANSACTION ID / REF NO .	
DRAWN ON BANK	
DATE OF PAYMENT	
AMOUNT	
REMITTANCE/ TRANSACTION COPY ENCLOSED	
REMARKS	

- 1) I hereby declare that, all the above particulars furnished by me are true to the best of my knowledge & belief.
- 2) I am aware that, my application is liable to be rejected if the particulars given are incomplete or found to be incorrect.

Applicant Signature