



website: www.ripans.ac.in

रीजनल इंस्टिट्यूट ऑफ पैरामेडिकल एंड नर्सिंग साइंसेज़ REGIONAL INSTITUTE OF PARAMEDICAL AND NURSING SCIENCES

(स्वायत्त संस्थान, अधीनस्थ स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार)
(An autonomous Institute under Ministry of Health & Family Welfare, Govt. of India)

जेमाबोक, आइजोल, मिज़ोरम – 796017
Zemabawk, Aizawl, Mizoram – 796017

Phone: 0389-2350521
e-mail: admin@ripans.ac.in

No.A.12019/1/2025-Estt/RIPANS/95

Dated Aizawl the 9th May, 2025.

EMPLOYMENT NOTICE NO 5 OF 2025-26

Applications are invited in prescribed form by the Director, Regional Institute of Paramedical & Nursing Sciences, Aizawl from Indian citizens for the following posts on **Contractual** basis:

DETAILS OF POSTS TO BE FILLED UP ON CONTRACT BASIS:

Sl. No.	Name of post	Level	No. of posts	Required educational and other qualifications	Age limit for direct recruits	Remuneration per month for direct recruits
1.	Medical Superintendent	13	1	Essential: 1. A medical qualification included in Schedule I & II or Part II of the third schedule of the Indian Medical Council Act of 1956. (Candidates possessing the qualification included in Part-II of the third schedule should also fulfill the conditions specified in Section 13 (3) of the Act. 2. A Post Graduate qualification i.e. MD/ MS or a recognized qualification equivalent thereto in any Medical Discipline. OR Master's Degree in Hospital Administration from a recognized Institution/ University or a recognized qualification equivalent thereto. 3. The candidate must be registered with the Central/State Medical Council.	Preferably below 50 years.	₹ 1,23,100 plus 50% of DA

				<u>Experience:</u> 10 years' teaching and /or research experience after obtaining the postgraduate qualification in the speciality or Master's Degree in Hospital Administration of which at least 5 years should be in the administration of a major Hospital in a senior position.		
2.	Specialist Doctors (Medicine-1, Paediatrics-1, Orthopaedics-1)	11	3	<u>Essential:</u> 1. A recognized MBBS degree qualification included Schedule I & II or Part II of the Third Schedule of the Indian Medical Council Act, 1956. Persons possessing qualifications included in Part-II of the Third Schedule should also fulfill the conditions specified in Section 13 (3) of the Indian Medical Council Act, 1956 (102 of 1956). 2. Post Graduate degree e.g. MD or MS in the concerned subject or a recognized qualification equivalent thereto. 3. The candidate must be registered with the Central/State Medical Council. <u>Experience:</u> Three years' experience in the concerned speciality after obtaining the Post-graduate degree or 5 years' experience in the concerned speciality after obtaining the Post-graduate Diploma.	Not exceeding 40 years	₹ 67,700 plus 50% of DA
3.	Dental Technician	4	1	<u>Essential:</u> Class 12 th (Science) pass with Diploma in Dental Mechanic or Dental Technique 1 year' experience in Dental technique in Central/State Govt Hospital or reputed hospital/organisation.	Between 18 and 27 years	₹ 25,500 plus 50% of DA
4.	OT Technologist	4	2	<u>Essential:</u> 1. Class 12 th (Science) pass from a recognized Board. 2. Diploma or Certificate in Operation Theatre Course. One year experience of working in Operation Theatre in a Central/State Govt Hospital or reputed hospital/organisation.	Between 18 and 27 years	₹ 25,500 plus 50% of DA
5	CSSD Assistant Grade-II	2	1	<u>Essential:</u> Theatre Assistant Course with 1 year' experience in CSSD/Operation Theatre OR 12th with Science from a recognized University/Board with 1 year' experience in CSSD Operation Theatre and Blood Bank in any hospital.	Between 18 and 27 years	₹ 19,900 plus 50% of DA

Note: Experience may be relaxed if candidate(s) with the required experience is /are not available.

Terms & Conditions for engagement of contractual staff:

1. He/she shall perform the services as assigned by the controlling officer.
2. The normal working hours including night shifts would be fixed by the Institute's authority.
3. He/she shall be entitled to leave at the rate of 1.5 days of leave for every completed month of service, to be availed with prior permission.
4. In special circumstances, he/she would be called for services on holidays or beyond normal working hours.
5. The contractual appointment is for a period not exceeding 6 months as per provisions of Bye Laws of RIPANS or till the posts are created and filled whichever is earlier. After an initial engagement not exceeding 6 months, one day gap will be given. Those who wish to continue may submit fresh application before the expiry of the contract period.
6. **In case of retired Government employees:**
 - 6.1 He/she shall be paid a consolidated remuneration as per the formula of the pay drawn at the time of retirement minus basic pension subject to TDS etc.
 - 6.2 The amount of remuneration so fixed shall remain unchanged for the term of the contract. There will be no annual increment/percentage increase during the contract period.
 - 6.3 The remuneration for the services rendered in a month shall be payable in the subsequent month.
 - 6.4 Transport Allowance shall be fixed not exceeding the rate applicable at the time of retirement. The amount so fixed shall remain unchanged during the contract period.
 - 6.5 No other allowances shall be permissible to him/her except TA/DA on official tours. TA/DA entitlement shall be the same as what was entitled to him at the time of retirement from the service.
 - 6.6 Beyond two years after the age of superannuation where adequate justification exists, the term of contract may be extended based on a review of the task and the performance of the contract appointee, provided it shall not be extended beyond 5 years after superannuation.
7. In case of persons other than 6 above, the remuneration shall be the minimum basic pay of the corresponding pay level plus 50% of DA, as increased by the Govt. of India from time to time. No other allowances shall be permissible to him/her except TA/DA on official tours. TA/DA entitlement shall be the same as per entitlement of the corresponding pay level.
8. The Institute shall have the right to examine/review the services of contract staff.
9. He/she shall perform his/her obligations with all necessary skills, diligence, efficiency and economy.
10. No medical facility shall be provided to him/her by the Institute. The remuneration is deemed to include an element to cover the cost of medical cover, if any.
11. The Institute shall not be responsible for any loss, accident, damages/injury suffered by him/her whatsoever arising in or out of the execution of his/her work, including travel.

12. During the terms of service, he/she shall not engage in any private business of professional activity which could conflict with the interest of the Government.
13. He/she shall treat all official information as confidential and use the same only for the purpose of the performance of the services.
14. The service can be terminated by either side by giving one months' notice.
15. Deed of agreement shall be signed between the Institute and the newly appointed contractual staff.

TERMS & CONDITIONS FOR FILLING UP OF APPLICATION FORM:

1. The prescribed format of application (**Annexure-I**) is for those who are willing to apply for the post of Medical Superintendent/Specialist Doctor. Other required materials may be downloaded from RIPANS website www.ripans.ac.in
2. The prescribed format of application (**Annexure-II**) is for those who are willing to apply for the post of CSSD Assistant Grade-II/Dental Technician/OT Technologist. Other required materials may be downloaded from RIPANS website www.ripans.ac.in
3. Application form and other formats should be submitted in A-4 size paper only.
4. **Those who have already applied in response to Employment Notice No.3 of 2024-25 dated 13.08.2024 need not apply again.**
5. The prescribed application fee (non-refundable) as mentioned below should be deposited by internet banking/online mode.
 - i. Medical Superintendent/Specialist Doctors– Rs.500.00 (Rs.250.00 for Women applicants and SC/ST applicants on submission of supporting Certificate).
 - ii. CSSD Assistant Grade-II/Dental Technician/OT Technologist - Rs. 300.00 (Rs 150.00 for Women applicants and SC/ST applicants on submission of supporting Certificate)
 - iii. Bank details for transfer of application fee:

Account holder	: Director RIPANS
Account Number	: 30800100002790
Bank Name	: Bank of Baroda
Branch	: RIPANS
IFSC Code	: BARB0RIPANS (fifth character is zero)

OR

Payment may also be made by scanning the following QR code:



Copy of self-certified e-receipt/cyber receipt should be submitted along with application form. Payment through Demand Draft/Bankers Cheque/Cheque/Cash will not be accepted.

6. Persons with Disabilities (PwDs) are fully exempted from payment of the application fees on submission of relevant Disability Certificate issued by the competent authority.
7. Applicants already in employment in Government should route their applications through proper channel or produce No Objection Certificate (NOC). Such candidates are also required to produce Integrity Certificate and Vigilance Clearance Certificate at the time of interview, if not submitted earlier.
8. The candidates holding DNB qualifications would need to get their qualification verified by NBE as to whether it is as per the requirement of the Gazette notification No.MCI-12(2)/2018-Med.Misc/142810 dated 31.10.2018 and to submit such verification certificate along with application.
9. Applicants awarded degrees by foreign Universities are required to submit Equivalence Certificate issued by Association of Indian Universities, National Medical Commission (NMC)/ Indian Nursing Council (INC)/ Pharmacy Council of India (PCI). The Institute reserves the right to ask for Equivalence Certificate for various degrees from any of the applicants.
10. The UGC Approved List of Journals has been replaced with the new UGC-CARE Reference List of Quality Journals and with effect from 14.06.2019, the same shall be considered prospectively wherever applicable.
11. Applicants are advised to ensure their eligibility in all respects before applying, that they possess at least the minimum essential qualifications as laid down in the advertisement.
12. Mere fulfilling the minimum educational qualification and experience doesn't bestow right to a candidate to be called for interview.
13. Applications should be supported by relevant documents (self-certified) in all respects. Claims of educational qualifications should be supported by Certificates and Marksheets. Applications not supported by self-certified documents shall be summarily rejected.
14. Educational qualifications of recognized University and regulating Statutory bodies, as the case may be, will only be accepted.
15. The crucial date for determining the age limit, qualification and experience shall be the last date for receipt of application from candidates.
16. Incomplete applications will not be accepted. Applications and any fresh paper/enclosures submitted after the last date of submission of application shall not be considered.

17. The completeness of the submitted application is the sole responsibility of the applicant. The Institute will not be responsible for non-receipt/late receipt of any communication sent by the applicants due to postal delay/lost in transit.
18. The Institute shall verify the antecedents or documents submitted by a candidate, at any time, at the time of appointment or during the tenure of service. In case of false/fake documents, clandestine antecedents or suppression of information, services in the Institute shall be terminated.
19. In case of any inadvertent mistake in the advertisement and in the process of selection, which may be detected at any stage, even after issuing of appointment order, the Institute reserves the right to modify/withdraw/cancel any communication made to the candidate.
20. The decision of the competent authority in respect of selection shall be final and no correspondence in this regard will be entertained.
21. The Institute reserves the right not to fill any of the post(s). There may be an increase or decrease in the number of posts advertised.
22. The Institute reserves the right of any amendment, cancellation, and changes to this advertisement as a whole or in part without assigning any reason thereof.
23. A candidate has to submit separate applications, if he/she desires to apply for more than one post.
24. No TA/DA will be paid for appearing in the interview/recruitment process which will be held at RIPANS or any other place as decided by the competent authority.
25. All the information/updates related to the recruitment will be uploaded on the website of RIPANS only. Candidates are advised to regularly visit the website of RIPANS for updates.
26. All the communication to candidates regarding recruitment process will be made through email ID provided by them in their application form.
27. Any change in the correspondence address, contact details and email address shall be communicated to the Institute in writing.
28. In case of any assistance or clarifications regarding the recruitment, candidates may contact the Institute through email: admin@ripans.ac.in. Candidate must mention his/her application ID & the name of post applied in the Subject line of e-mail.
29. **Experience Certificate:** All claims of experience shall be supported by an Experience Certificate which is clear and complete in all respects.
 - i) The experience certificate shall bear the organization's letter-head, the date of issue, name of post, specific period of work, name and designation of issuing authority along with signature and official seal.
 - ii) Appointment letter and such other documents issued at the initial stage of appointment/engagement i.e., before completion of the experience under consideration shall not be accepted as valid proof of the period of work.
 - iii) The experience certificate shall reflect the rate of salary/ honorarium/ remuneration OR a separate supporting document reflecting the rate of salary/ honorarium/ remuneration shall be enclosed.
 - iv) The decision of the Institute in any matters related to teaching/ research/ post-doctoral/ professional experience shall be final.

Interested eligible candidates are requested to submit a signed copy of the original application in the prescribed form along with requisite documents and all required formats and one copy of recent passport size colour photograph. The envelope containing the application(s) should be super-scribed “**Application for the post ofon “Contractual basis”** and should be sent to **Director, RIPANS, Zemabawk, Aizawl, Mizoram – 796017.**

Last date of receipt of application is 09.06.2025.

Sd/-डॉ. संजय डी. सावंत/Dr. SANJAY D. SAWANT
निर्देशक/Director
रीजनल इंस्टिट्यूट ऑफ पैरामेडिकल/Regional Institute of Paramedical
& नर्सिंग साइंसेज़ /Nursing Sciences
आइज़ोल : मिज़ौरम/Aizawl:Mizoram

Regional Institute of Paramedical and Nursing Sciences (RIPANS)

Aizawl, Mizoram

(Candidates are advised to read terms & conditions and instruction, before filling up the Application Form)

Application for the post of in on Contractual basis in RIPANS, Aizawl vide Employment Notice No 5 of 2025-26	Paste recent passport size colour photograph (Do not staple)
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1. Name of the applicant (in block letters) :

2. Marital Status :

3. Father's/Husband's Name :

4. (a) Mailing Address :

.....

PIN:..... Mobile No.:.....

E-mail:.....

(b) Permanent Address :

.....

PIN:..... Mobile No.:.....

E-mail:.....

5. a) Date of Birth: :

b) Age as on (09.06.2025) :

c) Sex: (Male/Female) :

d) Nationality :

e) State of Domicile :

f) Religion :

6. Whether belongs to (GEN/SC/ST/OBCs) :
 (Please attach attested copy of relevant certificates)

7. a) Registration No. with the concerned Council :

b) Name of the Council :

b) State in which registered :

8. Educational Qualifications:

(Please attach attested copies of certificates/degrees in support of your qualifications)

a) Undergraduate Career (HSLC onwards):

Examination Passed	Year of Passing	Class/Division	Board/University

b) Post Graduate Diploma:

Examination Passed	Year of Passing	Class/Division	Board/University

c) Postgraduate Career:

Examination Passed	Year of Passing	Class/Division	Board/University

9. Teaching/Research Experience: (Please attach attested copies of experience certificates)

a) Before obtaining Postgraduate Qualification:

Post Held (Indicate Temporary/Permanent)	Period		Total Period			Pay Scale	Employer's Address
	From	To	Years	Months	Days		

b) After obtaining Postgraduate Qualification:

Post Held (Indicate Temporary/Permanent)	Period		Total Period			Pay Scale	Employer's Address
	From	To	Years	Months	Days		

10. Details of Prizes, Medals, Scholarships & National/International Awards etc.:

11. Additional qualification such as membership of scientific society etc.:

12. Research experience, if any, together with details of published works in indexed journals

Number of papers (Separate sheet may be attached if required):

	Published		Accepted for publication	Presented at conference
	Indexed	Non Indexed		
National				
Inter-National				

13. a) Present employment/post held :

b) Pay Scale/Remuneration :

c) Address of present employer :

14. Give below the names/particulars of two referees from your speciality who are in a position to testify from personal knowledge to your fitness for the post.

Sl. No.	Name	Status	Address	Phone	E-mail

Note : i. You should have worked under one of the referees for at least two years.

ii. They must not be related to you.

iii. They must not be members of the Selection Committee of the Institute.

15. Attach attested copies of certificates/degrees in support of age, category, qualification and experience etc.

as per list enclosed as **Annexure I (i)**.

Date:.....

Place:.....

Signature of the candidate

Declaration by the candidate

I, the undersigned, hereby declare that I have carefully read and understood the instructions and particulars provided by the Institute and affirm that all information that I have furnished is true, complete and correct to the best of my knowledge and belief. I have not suppressed any material, fact or factual information. I understand that my application is liable to be rejected in the event of any mis-statement/discrepancy in the particulars being detected and after my appointment in such an event, my services are liable to be terminated without any notice to me or reasons thereof.

Date:.....

Place:.....

Signature of the candidate

ENDORSEMENT BY FORWARDING AUTHORITY

(Candidates already employed should get the following endorsement signed by his/her present employer/appointing authority)

1. Certified that Dr./Shri/Smt./Kumari_____ is presently holding a post of _____ in this department/office/institution/ organization. I have no objection to his/her application being considered for the post.
2. Certified that he/she submitted his/her application to the department/office/institution/ organization on _____ for onward transmission to RIPANS, Aizawl.

Date:.....

Signature

Place:.....

Designation

Office Seal

FOR OFFICE USE ONLY

1. Application received on :
2. Selected for the interview : YES ☐ NO ☐
3. Contact details of Candidate : a) Mobile No. :
b) email :

Annexure I (i)

Check List/List of enclosures: (Required under column 15 of the application form)

Sl.No	Particulars of enclosures	Marked page(s)
1.	Birth Certificate	
2.	Matriculation/HSLC Certificate & Marksheet	
3.	HSSLC or equivalent Certificate & Marksheet	
4.	Graduation and above Certificate & Marksheet	
5.	Experience certificate (s)	
6.	Community certificate (SC, ST, OBC)	
7.	Registration with concerned Council Certificate	
8.	Any other relevant certificates (Please specify)	

Regional Institute of Paramedical and Nursing Sciences (RIPANS)
Aizawl, Mizoram

(Candidates are advised to read terms & conditions and instruction, before filling up the Application Form)

Application for the post of in on Contractual basis in RIPANS, Aizawl vide Employment Notice No 5 of 2025-26	Paste recent passport size colour photograph (Do not staple)
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1. Name of the applicant (in block letters) :
2. Marital Status :
3. Father's/Husband's Name :
4. (a) Mailing Address :
-
- PIN:..... Mobile No.:.....
- E-mail:.....
- (b) Permanent Address :
-
- PIN:..... Mobile No.:.....
- E-mail:.....
5. a) Date of Birth: :
- b) Age as on (09.06.2025) :
- c) Sex: (Male/Female) :
- d) Nationality :
- e) State of Domicile :
- f) Religion :
6. Whether belongs to (GEN/SC/ST/OBCs) :
- (Please attach attested copy of relevant certificates)

7. Educational Qualifications:

(Please attach attested copies of marksheets/certificates/degrees in support of your qualifications)

a) HSLC onwards:

Examination Passed	Year of Passing	Class/Division	Board/University

8. Experience (where applicable) : Please attach self-attested copies of experience certificates)

a.

b.

9. a) Present employment/post held :

.....

b) Pay Scale/Remuneration :

.....

c) Address of present employer :

.....

10. Give below the names/particulars of two referees who are in a position to testify from personal knowledge to your fitness for the post.

Sl. No.	Name	Status	Address	Phone	E-mail

11. Attach self-attested copies of certificates/degrees in support of age, category, qualification and experience etc. as per list enclosed as **Annexure II (a)**.

Date:.....

Place:.....

Signature of the candidate

Declaration by the candidate

I, the undersigned, hereby declare that I have carefully read and understood the instructions and particulars provided by the Institute and affirm that all information that I have furnished is true, complete and correct to the best of my knowledge and belief. I have not suppressed any material, fact or factual information. I understand that my application is liable to be rejected in the event of any mis-statement/discrepancy in the particulars being detected and after my appointment in such an event, my services are liable to be terminated without any notice to me or reasons thereof.

Date:.....

Place:.....

Signature of the candidate

ENDORSEMENT BY FORWARDING AUTHORITY

(Candidates already employed should get the following endorsement signed by his/her present employer/appointing authority)

1. Certified that Dr./Shri/Smt./Kumari_____ is presently holding a post of _____ in this department/office/institution/ organization. I have no objection to his/her application being considered for the post.
2. Certified that he/she submitted his/her application to the department/office/institution/ organization on _____ for onward transmission to RIPANS, Aizawl.

Date:.....

Signature

Place:.....

Designation

Office Stamp

FOR OFFICE USE ONLY

1. Application received on :
2. Selected for the interview : YES ☐ NO ☐
3. Contact details of Candidate : a) Mobile No. :
b) email :

Annexure-II(a)**Check List/List of enclosures: (Required under column 11 of the application form)**

Sl.No	Particulars of enclosures	Marked page(s)
1.	Birth Certificate	
2.	Matriculation/HSLC Certificate & Marksheet	
3.	HSSLC or equivalent Certificate & Marksheet	
4.	Graduation and above Certificate & Marksheet	
5.	Experience certificate (s)	
6.	Community certificate (SC, ST, OBC)	
7	Any other relevant certificates (Please specify)	

**FORMAT OF CERTIFICATE REQUIRED TO BE ENCLOSED SEPARATELY
ALONGWITH THE APPLICATION OF CANDIDATE
(On Organisation's letter head)**

INTEGRITY CERTIFICATE

After scrutinizing the ACR/APAR of Dr./Shri/Smt./Ms.
_____ who has applied for the post of
_____ in RIPANS, Aizawl, it is certified that his/ her
integrity is beyond doubt.

Date:

**Authorised signatory
Name & Office Seal**

VIGILANCE CLEARANCE CERTIFICATE

Certified that no vigilance case or disciplinary proceedings or criminal proceeding
is either pending or contemplated against Dr./Shri/Smt./Ms.
_____ who has applied for the post
of _____ in RIPANS, Aizawl on deputation
basis.

Date:

**Authorised signatory
Name & Office Seal**

NO PENALTY CERTIFICATE

Certified that no minor/major penalty has been imposed on Dr./Shri/Smt./Ms.
_____ who has applied for the post
of _____ in RIPANS, Aizawl on deputation
basis, during the last ten years.

Date:

**Authorised signatory
Name & Office Seal**

NO OBJECTION CERTIFICATE

(To be signed by employer/appointing authority)

1. Certified that Dr./Shri/Smt./Kumari _____ is presently holding a post of _____ in this department/office/institution/organization. I have no objection to his/her application being considered for the post.
2. Certified that he/she submitted his/her application to the department/office/institution/organization on _____ for onward transmission to RIPANS, Aizawl.

Date:.....

Place:.....

Signature

Designation

Office Seal.....