



All India Institute of Medical Sciences, Raebareli

(An Autonomous Institute under the Ministry of Health and Family Welfare, Govt. of India)

Munshiganj, Raebareli - 229405, Uttar Pradesh, India

www.aiimsrbl.edu.in

Ref.No-AIIMS/Rbl/Rec/ATF/2025/03

Date:-25/03/2025

NOTIFICATION

WALK-IN-INTERVIEW FOR THE POST OF MEDICAL OFFICER (CONTRACTUAL) FOR OUT-PATIENT, ADDICTION TREATMENT FACILITY AT ALL INDIA INSTITUTE OF MEDICAL SCIENCES, RAEBARELI.

The institute is running Outpatient Addiction Treatment Facility via a scheme under Ministry of Social Justice and Empowerment (MoSJE), Government of India, for establishing Addiction Treatment Facilities (ATFs) in Government Hospitals / Health care settings. The scheme is running coordinated and implemented at the national level by the National Drug Dependence Treatment Centre (NDDTC), All India Institute of Medical Sciences (AIIMS).

S.No.	Name of Post	Number of Post	Educational qualification and experience	Remuneration
1	Medical Officer	01	Minimum Qualification of MBBS from a recognized institution along with Medical Council registration/state council registration (preferable: MD or equivalent qualification in Psychiatry).	Rs. 60000/-

Application along with a passport size photo and self-attested copies of all relevant documents should be submitted by **25/04/2025, up to 5 PM** on the email atf.aiimsrbl@gmail.com.

Written and/or interview of eligible candidates will be conducted on **10/05/2025, at 10.AM** at **Addiction Treatment Facility, Department of Psychiatry, AIIMS Raebareli**. The candidate should come with all original documents and valid photo ID at the time of interview.

Sd/-

Dr. Shruti Sinha

Nodal Officer
Addiction Treatment Facility

All India Institute of Medical Sciences, Raebareli, UP

GENERAL INSTRUCTIONS FOR FILLING UP OF APPLICATION FORM.

1. Please read the following instructions carefully before filling up of offline application form for above mention posts.
2. Candidates are advised to fill up the form in the format provided.
3. Please note that all the columns of the application have to be compulsorily filled up. In case of nil information for a particular column, 'N/A' is to be written. The form is to be filled up by the candidate himself / herself in **Block Capitals** with blue/black ball point pen. The form is to be filled up neatly without any overwriting. Use of corrective fluid (whitener) is not permitted. Column wise instructions are as under:-
 - a) NAME: Full name as written in Matriculation Certificate
 - b) MOTHER'S NAME: Mother's name as written in Matriculation Certificate
 - c) FATHER'S NAME: Father's name as written in Matriculation Certificate
 - d) GENDER: Male / Female
 - e) PRESENT ADDRESS WITH PIN CODE: Complete present address of the candidate with PIN code
 - f) MOBILE NO
 - g) E-mail
 - h) DATE OF BIRTH: Date of Birth as per Matriculation Certificate in DD/MM/YYYY format.
 - i) DECLARATION: The candidate should carefully read and understand the declaration before signing.
 - j) SIGNATURE OF APPLICANT – The candidate should sign in the space provided.
 - k) PLACE & DATE – Place and date to be filled up at the time of filling up of application form.
4. The application in the prescribed format (Annexure) and relevant documents attached should be sent by email to the following address atf.aiimsrbl@gmail.com
5. **The last date for receiving form is 25/04/2025**

6. Only shortlisted candidates will be informed and called for the interview. The list of short listed candidates and date of the interview will be uploaded in the website. The candidates are advised to regularly visit the AIIMS, Raebareli website for information.
7. Based on this experience, the selected candidate cannot claim any permanent employment from AIIMS, Raebareli.
8. It is the responsibility of the candidate to ensure that they possess the requisite qualifications to be selected for the desired post. If any deficit/discrepancy is detected at any stage, even after selection, it may lead to cancellation of selection/employment offer.

AIIMS, Raebareli

APPLICATION FORM

(Application for Appointment on Contract Basis)

1. Post applied for:.....

2. Applicant's Name:..... Sex (M/F).....

3. Father's Name:..... Mother's Name

4. Date of Birth:..... Age

5. Mailing Address:.....

.....PIN.....

6. Permanent Address:.....

.....PIN.....

7. Telephone No. :..... Mobile No:.....

8. E-mail ID:.....

9. Educational, Technical/Professional Qualifications (High School and above): (Attach Certificates)

Qualifications	Board/University/Institutions	Passing Year	Percentage of Marks	Subjects

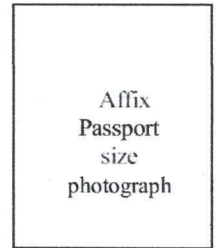
10. Computer Skill:-

i). Working knowledge of MS Office/E-mail

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Yes/No

ii). Having knowledge of Hindi/English Typing

-
Yes/No



11. Experience (From present to previous):-

(Attach proof of previous experience like appointment letter, experience certificate, salary certificates etc.)

Designation	Name of Institute/ Organization	Nature of Work	Working Duration		Name, designation and contract no. of Reporting officer
			From	to	

12. Any other information:.....

.....

Declaration

I declare that the information given above is true to the best of my knowledge and belief.
Any information, if found false, will reject my candidature.

Date:.....

Place:.....

Applicant's Signature