



क्षेत्रीय आयुर्विज्ञान संस्थान, इंपाल: मणिपुर
REGIONAL INSTITUTE OF MEDICAL SCIENCES, IMPHAL, MANIPUR
 (स्वास्थ्य और परिवार कल्याण मंत्रालय, भारत सरकार के अंतर्गत एक स्वायत्त संस्थान)
 (An Autonomous Institute under the Ministry of Health & Family Welfare, Govt. of India)

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ADVERTISEMENT

No. GEN/CFAC/17/2025-EST Sec : A "walk-in- interview" will be held for selection of suitable persons for 2 (Two) posts of Associate Professors on contract basis in Sports Medicine-1 and Cardiology-1 Department of RIMS, Imphal, will be held on **Monday, the 18th August, 2025, at 2.30 p.m.** in the Conference Room of Director, Jubilee Hall, RIMS, Imphal. The appointment is purely on contractual basis, for a period of 6 months, which may be extended as per requirement/performance. The detail of the posts are given under:-

Sl. No.	Name of the post	No. of post	Reservation	Qualification and experience
i).	Associate Professor of Sports Medicine	1	UR	<u>Qualification</u> M.D.(Sports Medicine)/MS (Orthopaedic)/MD (Physical Medicine & Rehabilitation)/MD(Physiology) with 2 years experience in Sports Medicine <u>Teaching/Research experience:</u> i). As Reader/Assistant Professor in Sports Medicine/Orthopaedics/Physical Medicine and Rehabilitation for 5 years in a recognised Medical College. ii). Minimum of 4 research publications in indexed national journals of the speciality or related Speciality.
ii).	Associate Professor of Cardiology	1	UR	<u>Academic Qualification :</u> D.M. (Cardiology). <u>Teaching /Research experience :</u> As Asst. Prof. / Lecturer in Cardiology for two years in a recognised Medical College/ Teaching Institution <u>Desirable :</u> Minimum of four Research Publication index in Index Medicus/ National Journals.

2. Remuneration of Associate Professor on Contract Basis shall be given as consolidated pay of Rs.1,30,000/- (Revision of pay is under process).

3. The upper age limit of candidates for these posts is 45 years, relaxable as per the Government of India norms.

4. Interested candidates, having the above qualification, experience and within the upper age limit, may attend the walk-in-interview, on submission of an application enclosing their bio-data, along with photocopies of relevant testimonials to the office of the undersigned, **on or before 4.30 p.m. of Thursday, the 14th August, 2025.** The candidates will be required to produce their original certificates, testimonials before the Selection Committee at the time of Interview.

5. Incomplete application and applications received after the stipulated date/time shall be summarily rejected without any intimation to the candidates.

Signed by

Mecolt Rajkumar Singh

Date: 06-08-2025 15:39:01

(R.K. Mecolt Singh)

Deputy Director (Admn.)

Copy to:-

1. P.S. to Director, RIMS, Imphal – for kind information of Director
2. The Medical Superintendent, RIMS Hospital, Imphal
3. The Dean (Academics), RIMS, Imphal
4. The Concerned Head of Department, RIMS, Imphal
5. The C.A.D /F.A., RIMS, Imphal
6. The System Administrator, IT Cell, RIMS, Imphal – for uploading the above advertisement in the RIMS website for wide information
7. The Media Advisor, RIMS, Imphal – for publication in 2 (two) local dailies for one day
8. Notice Boards.
9. Concerned file.

PRESCRIBED FORMAT FOR THE POST OF
_____, RIMS, IMPHAL

1. Full Name in Block Letters : _____
2. Father's /Husband Name : _____
3. Date of birth : _____
4. Age (as on the last date of submission of application) : _____
5. Gender & Marital Status : _____
6. Permanent address in full : _____
7. Present address with postal code in full : _____
8. Telephone/Mobile No. : _____
9. E-mail ID : _____
10. Nationality (State whether by birth or by domicile) : _____
11. Do you belong to Schedule Caste/Schedule Tribe/ OBC category ?:
(if yes please indicate and enclose a copy of the certificate)

Affix recent
Passport size
photograph

12. Details of Examination passed :

Examination	Name of School/College with address	Name of Board/Council/University	Month & Year of passing	Division/ Class obtained	% of marks obtained
10+2/P.U.C.					
MBBS					
M.D./M.S./ M.Ch./D.M. with speciality					

13. Teaching experience:

(a) Before Post Graduation:

Sl. No.	Post (s) held	Name of College/Institution	Period of service		Nature of Appointment (Regular/Contract)	Reason of leaving
			From	To		

(b) After Post Graduation:

Sl. No.	Post (s) held	Name of College /Institution	Period of service		Nature of Appointment (Regular/Contract)	Reason of leaving
			From	To		

14. Research works & Publications:

Sl. No.	Year of publication	Name of Journal indicating Vol. No., Page no.etc.	Title	Indicate whether 1 st Author or Co-author

15. Seminar/Workshop/Conference attended:

Sl. No.	Year	Name of event indicating participation level (Paper presentation etc.)	Details of presentation

16. Whether you have published any book or contributed a chapter in a book? If so mention the name of the book, year of publication etc.

Name of the book published	Chapter contributed	Year of publication

17. Prizes and Awards received:

- 1.
- 2.
- 3.

18. Extra Curricular activities

- 1.
- 2.
- 3.

Note: In case the space provided in the format is not sufficient a separate statement/sheet may be attached as Annexure.

19.

DECLARATION

I, Shri/Shrimati/Kumari _____

Declare as under:

- i). That I am unmarried/a widower/ a widow.
- ii) That I am married and have only one spouse living.
- iii) That I have entered into or contracted a marriage with a person having a spouse living.
Application for grant of exemption is enclosed.
- iv) That I have entered into and contracted a marriage with another person during the lifetime of my spouse. Application for grant of exemption is enclosed.

AND

- v) That I hereby declared that the entries made in format are true and correct to the best of my knowledge and belief. In the event of any information being found false/incorrect my candidature /services are liable to be terminated without any notice.

Station:

Date:.....

Signature:

Full name of the applicant:

List of documents enclosed:

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

NO. OBJECTION CERTIFICATE

Certified that _____ is working as

_____ on regular / contract basis in the (PB+GP) _____

in the pay of P.B. Rs. _____ + G.P. Rs. _____.

The Institute / College has no objection to his / her applying for the post of
_____, RIMS, Imphal.

Further, certified that in case if he / she is appointed, he /she will be released from the service
of this Institute /College.

Date: _____

Signature

Head of the Institute /College

Name:

Designation:

Institute /College :

Seal