



National Institute of Technical Teachers Training and Research
Ministry of Education, Government of India, Taramani, Chennai 600 113
राष्ट्रीय तकनीकी शिक्षक प्रशिक्षण एवं अनुसंधान संस्थान
शिक्षा मंत्रालय, भारत सरकार, त्रमणि, चेन्नई 600 113

Advt. No.: 07/2023-24

Dated: 23.09.2023

**RECRUITMENT OF GROUP C POST
RESERVED FOR PERSONS WITH DISABILITIES (PwD)**

IMPORTANT INSTRUCTIONS TO THE CANDIDATES

1. Any corrigendum/ cancellation notice related to the recruitment process shall be published ONLY in the official website of NITTTR Chennai (<https://www.nitttrc.ac.in>) and not in the newspapers. Therefore, candidates are advised to check the Institute website periodically.
2. **Important dates to be noted by the applicants regarding the submission of application:**

Application format can be downloaded from the Institute's website (https://www.nitttrc.ac.in)	23.09.2023
Last date for receiving the hard copy of the duly filled application along with the proof of payment of application fee and all the enclosures through Registered Post/ Speed Post/ Courier	25.10.2023 5.30 pm IST

3. Service conditions:

- The Institute is governed by the rules and regulations of the Society in force/ amended from time-to-time and is fully financed by the Ministry of Education, Government of India, New Delhi.
- Appointments to the advertised posts will be made based on the Institute's approved norms. Pay and other allowances will be admissible as sanctioned by the Government of India from time-to-time. National Pension System (NPS) introduced from January 2004 will be applicable. Leave Travel Concession and Medical facilities are also admissible as per the rules of the Institute in force/ amended from time-to-time.

4. General instructions:

Please read the following instructions carefully before applying. Failure to comply with any of the directions given below may result in the rejection of the application by the Institute.

1	The applicants are requested to visit the Institute's website periodically for any updates regarding the recruitment process. For Technical Assistant Gr. II (Jr. Electronics Technician) and Technical Assistant Gr. II (Graphic Assistant), Written Test will be conducted. For Junior Secretariat Assistant (Hindi Typist), Written and Skill Test will be conducted. Skill test for JSA – Hindi Typist will be of qualifying in nature. The candidates shall appear for the written test and skill test on the date and venue mentioned in the Hall ticket, which shall be downloaded accordingly from our Institute website. The candidates shall adhere to the instructions mentioned in the Hall ticket.
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2	Only the candidates who possess the minimum essential qualifications are advised to apply.
3	No application fee will be charged from the candidates.
4	The application form (both PDF and WORD formats) can be downloaded from the Institute's website and the duly filled hard copy of the application along with the self-attested copies of the relevant supporting documents should reach "The Director, National Institute of Technical Teachers Training and Research (NITTTR), Taramani, Chennai 600 113, Tamilnadu, India" on or before 25.10.2023 (5.30 pm IST). The envelope should be superscribed as "Application for the post of".
5	Mere possession of the minimum essential qualifications does not entitle the candidates to be called for the Written Test and Skill Test. Skill test for JSA – Hindi Typist will be of qualifying in nature. Also, appearance of the candidate in the Written Test and Skill Test does not guarantee the employment offer. NITTTR Chennai reserves the right to restrict the number of candidates to be called for the Written Test and Skill test to a reasonable number, on the basis of qualifications and/ or experience higher than the minimum requirements prescribed in the advertisement.
6	Candidates who have been awarded Degrees by recognized Foreign Universities should enclose the "Equivalence Certificate" issued by the Association of Indian Universities, New Delhi, without which their candidature will not be considered.
7	Applications from candidates who are currently employed shall be considered only if they are forwarded through proper channel (Head of the Institution/ Organization) with a "No Objection Certificate (NOC)" from the present employer (if applicable), failing which the application (including the advance copy) is liable to be summarily rejected. Applicants who are employed in Government/ PSUs/ Government Autonomous Institutions/ Central and State Government Undertakings (if applicable) will be required to produce the Vigilance Clearance Certificate and copies of the ACR/APAR pertaining to the last five years along with the NOC, at the time of document verification/ test/ interview.
8	Reservation policy will be followed as per the norms of Government of India. Instructions issued by the Ministry of Education till the date of test/ interview will be applicable. Candidates belonging to SC / ST/ PwD / Ex-Servicemen should enclose a copy of the relevant certificate issued by the Competent Authority along with the application. If not, they will be treated as UR candidates only. Candidates belonging to OBC (Non-Creamy Layer) should enclose a copy of the relevant latest certificate issued by the Competent Authority on or after 1 st April 2023; If not, they will be treated as UR candidates only. Candidates belonging to EWS should enclose latest EWS Certificate from Competent Authority along with the Income & Assets Certificate and Form -16 issued by the Competent Authority on or after 1 st April 2023; If not, they will be treated as UR candidates only. Self-attested copies of the Documents / Certificates / Degrees are required to be attached with the printout of the duly filled in Application Form.



9	<p>PwD Candidates who claim to be permanently unfit to take the Typing test because of Physical disability and seek exemption from appearing and qualifying in Typing test are required to attach the following:</p> <ul style="list-style-type: none"> (i) Medical Certificate seeking exemption in prescribed format (Annexure-A) from the Competent Medical Authority i.e. the Civil Surgeon of a Government Health Care Institution (ii) Certificate of Disability in the prescribed format (Annexure-B) (iii) Undertaking in prescribed format (Annexure-C)
10	<ul style="list-style-type: none"> (i) Reservations for PwD are as per Govt. of India norms (ii) Only such person, who have suffered not less than 40% of relevant disability are eligible to be considered as per the Persons with Disabilities (Equal opportunities, Protection of rights & Full participation) Act, 1995 (iii) Eligible candidates will be permitted to engage Scribe in accordance with the norms prescribed in this regard and they have to make their own arrangements for the same. (iv) Candidates who opt for engaging their own scribe should indicate the same while submitting their application.
11	<p>The eligibility of the candidate (qualifications, experience, upper age limit and any other shortlisting criteria) will be determined as on the last date of the submission of application.</p>
12	<p>Age relaxation is applicable upto 10 years in the upper age limit for the persons currently engaged in NITTTR Chennai including its Extension Centres on ad-hoc/ Temporary / Contractual/ Outsourced basis, to participate in the recruitment process for Group C posts subject to the following conditions:</p> <ul style="list-style-type: none"> (a) The relaxation will be applicable only for participation in the regular recruitment process. (b) No relaxation in qualification and experience will be allowed under any circumstances. (c) Relaxation in age will be allowed only to the persons, who are working/ serving in NITTTR Chennai including its Extension Centres on ad-hoc/ temporary/ contractual/ outsourced basis on the date of notification and are continuing till the last date of receipt of applications advertised for the positions under the advertisement. (d) The relaxation granted is only to allow these persons to participate in the selection process and will not be claimed as a matter of right for appointment to any post. (e) Service certificate obtained in this regard from the relevant authority / contractor to be attached with the filled-in application form.
13	<p>There is no need to submit any certificate in original along with the application. During certificate verification, non-submission of necessary supporting documents shall lead to rejection of candidature, even if he/she qualified in the written exam. The Institute does not take any responsibility in returning the original certificates, if they are attached along with the application.</p>



14	<p>The Institute reserves the right</p> <ul style="list-style-type: none"> • to cancel the advertisement of any post without any prior notice/ reason • to cancel the whole process of recruitment at any stage without assigning or clarifying any reason • to conduct Written Test for the post of Technical Assistant Gr.II (Jr. Electronics Technician) and Technical Assistant Gr.II (Graphic Assistant), Written Test and Skill Test as qualifying in nature for the post of Junior Secretariat Assistant (Hindi Typist) to select the candidates on the basis of merit • to issue any corrigendum to this notification as necessary/ deemed fit which will be published ONLY in the Institute's website for the information of all concerned • not to issue the appointment letter to the selected candidate(s) • The decision of the Institute shall be final and binding in this regard.
15	<p>Applications incomplete/not satisfying the minimum essential requirements/ without requisite information/ without proper enclosures/ filled with discrepancy/not forwarded through proper channel (if applicable)/ received after the last date will be rejected. No further correspondence will be entertained in this regard.</p>
16	<p>No correspondence whatsoever will be entertained regarding the postal delays or loss of the application during transit, reasons for not being called for the Written Test and Skill test and conduct/ result of the Written Test and Skill test, etc. The decision of the Institute would be final and binding.</p>
17	<p>The recruitment and pay fixation shall be done by the Competent Authority of the Institute. The decision of the Competent Authority shall be final.</p> <ul style="list-style-type: none"> • The applications will be subjected to a rigorous scrutiny process. • Written Test for Technical Assistant Gr.II (Jr. Electronics Technician) and Technical Assistant Gr.II (Graphic Assistant), Written Test and Skill Test as qualifying in nature for Junior Secretariat Assistant (Hindi Typist) will be conducted for the candidates. • Skill test for JSA – Hindi Typist will be of qualifying in nature. • Syllabus and Exam pattern for Written Test and Skill Test will be posted in the Institute's website. • In cases, where more than one candidate secures the equal aggregate marks in the written exam, tie will be resolved by applying the following methods, one after another, till the tie is resolved: <ul style="list-style-type: none"> ➤ Date of birth i.e. the candidate older in age gets preference. ➤ Alphabetical order of the first name shall be given second preference • Requests for the change of the date of Written Test and Skill test will not be entertained. • No TA/DA will be provided to the candidates for attending the Written and Skill Tests.
18	<p>In case of any dispute/ ambiguity that may occur in the process of selection, the decision of NITTTR Chennai shall be final and binding. In case of any inadvertent mistake in the process of selection which may be detected at any stage even after the issue of the appointment letter, NITTTR Chennai reserves the right to modify/ withdraw/ cancel any communication made to the candidates.</p>



19	Successful candidates will be informed about the results in due course and interim enquiries regarding the same shall not be entertained.
20	A candidate who is found to have knowingly furnished any particulars which are false or to have suppressed any information, will be disqualified, and if appointed will be liable for dismissal without assigning any reason thereof.
21	NITTTR Chennai shall verify the antecedents or documents submitted by the candidates at any time (at the time of test/ appointment or during the tenure of the service). If any document submitted by the candidates are detected to be fake or if the candidate has a clandestine antecedents/ background and has suppressed the said information, then his/ her service from the Institute shall be terminated without serving any notice.
22	The rules of the Ministry of Education, Government of India with regard to the Pay & Allowances, Leave, NPS (Pension and Provident Fund, if applicable) shall be followed, subjected to amendments if any, from time-to-time.
23	In the event of selection, it is mandatory for the candidate to occupy the eligible type of residential quarter in NITTTR Staff Quarters, Gandhi Mandapam Road, Chennai 600025, subject to availability. Only in case of non-availability of institute residential quarter, the employees shall be eligible for HRA for outside accommodation.
24	Canvassing in any form will lead to disqualification of the applicant.
25	The BoG / Director shall have the power to lay down the procedure in respect of any matter not mentioned above.
26	In case of any dispute/ suite or legal proceeding against NITTTR Chennai, the jurisdiction shall be restricted to the Courts in Madras, which is the Headquarters of the Institute.
27	The selected candidates, even if initially appointed at the Headquarters, shall be liable for transfer to any of the Extension Centres of the Institute located at Bengaluru, Hyderabad, Kalamassery and Vijayawada.

Form of Medical Certificate to be produced by the Persons with Benchmark Disabilities candidates who seek exemption from appearing in the Typewriting Test

This is to certify that Sh./Smt./Kum _____ son/daughter/wife of Shri _____ is suffering from _____.

Clinical diagnosis as a result of which he/ she has the following disabilities. (Brief description of his/ her disabilities) -----

This is a permanent disability and the extent of his/ her disability works out to ____% of disability. This disability is likely to interfere with Typewriting (specify) -----

Signature of Civil Surgeon:

Name:

(Official Stamp)

Place:

Date:

Photograph of candidate clearly showing face with affected portion of the body

Signature of candidate:

Name:

Roll Number:

Form-V

Certificate of Disability

(In cases of amputation or complete permanent paralysis of limbs or dwarfism and in case of blindness)

[See rule 18(1)]

(Name and Address of the Medical Authority issuing the Certificate)

Recent passport size attested photograph (Showing face only) of the person with disability.

Certificate No. _____

Date: _____

This is to certify that I have carefully examined Shri/Smt./Kum. _____ son/wife/daughter of Shri _____
 Date of Birth (DD/MM/YY) _____ Age _____ years,
 male/female _____ registration No. _____ permanent
 resident of House No. _____ Ward/Village/Street _____
 Post Office _____ District _____ State _____, whose
 photograph is affixed above, and am satisfied that:

(A) he/she is a case of:

- locomotor disability
- dwarfism
- blindness

(Please tick as applicable)

(B) the diagnosis in his/her case is _____

(C) he/she has _____ % (in figure) _____ percent (in words) permanent locomotor disability/dwarfism/blindness in relation to his/her _____ (part of body) as per guidelines (.....number and date of issue of the guidelines to be specified).

2. The applicant has submitted the following document as proof of residence:-

Nature of Document	of Issue	ls of authority issuing certificate

(Signature and Seal of Authorised Signatory of notified Medical Authority)

Signature/thumb impression of the person
 in whose favour certificate of disability is issued

Form - VI
Certificate of Disability
(In cases of multiple disabilities)
[See rule 18(1)]

(Name and Address of the Medical Authority issuing the Certificate)

Recent passport size attested photograph (Showing face only) of the person with disability.

Certificate No. _____

Date: _____

This is to certify that we have carefully examined Shri/Smt./Kum. _____ son/wife/daughter of Shri _____ Date of Birth (DD/MM/YY) _____ Age _____ years, male/female _____.

Registration No. _____ permanent resident of House No. _____ Ward/Village/Street _____ Post Office _____ District _____ State _____, whose photograph is affixed above, and am satisfied that:

(A) he/she is a case of Multiple Disability. His/her extent of permanent physical impairment/disability has been evaluated as per guidelines (.....number and date of issue of the guidelines to be specified) for the disabilities ticked below, and is shown against the relevant disability in the table below:

S. No	Disability	Affected part of body	Diagnosis	Permanent physical impairment/mental disability (in %)
1.	Locomotor disability	@		
2.	Muscular Dystrophy			
3.	Leprosy cured			
4.	Dwarfism			
5.	Cerebral Palsy			
6.	Acid attack Victim			
7.	Low vision	#		
8.	Blindness	#		
9.	Deaf	£		
10.	Hard of Hearing	£		
11.	Speech and Language disability			
12.	Intellectual Disability			
13.	Specific Learning Disability			

14.	Autism Spectrum Disorder			
15.	Mental illness			
16.	Chronic Neurological Conditions			
17.	Multiple sclerosis			
18.	Parkinson's disease			
19.	Haemophilia			
20.	Thalassemia			
21.	Sickle Cell disease			

(B) In the light of the above, his/her over all permanent physical impairment as per guidelines (.....number and date of issue of the guidelines to be specified), is as follows :

In figures : - ----- percent

In words :- ----- percent

2. This condition is progressive/non-progressive/likely to improve/not likely to improve.

3. Reassessment of disability is :

(i) not necessary,

or

(ii) is recommended/after years months, and therefore this certificate shall be valid till -----

(DD) (MM) (YY)

@ e.g. Left/right/both arms/legs

e.g. Single eye

£ e.g. Left/Right/both ears

4. The applicant has submitted the following document as proof of residence:

Nature of document	Date of issue	Details of authority issuing certificate

5. Signature and seal of the Medical Authority.

Name and Seal of Member	Name and Seal of Member	Name and Seal of the Chairperson

Signature/thumb impression of the person in whose favour certificate of disability is issued.

Form - VII

Certificate of Disability

(In cases other than those mentioned in Forms V and VI)
(Name and Address of the Medical Authority issuing the Certificate)

(See rule 18(1))

Recent passport size
attested photograph
(Showing face only) of the
person with disability

Certificate No. _____

Date: _____

This is to certify that I have carefully examined
Shri/Smt./Kum _____
son/wife/daughter of Shri _____ Date
of Birth (DD/MM/YY) _____ Age _____ years, male/female
_____ Registration No. _____ permanent resident of House
No. _____ Ward/Village/Street _____ Post Office
_____ District _____ State _____, whose
photograph is affixed above, and am satisfied that he/she is a case of
_____ disability. His/her extent of percentage
physical impairment/disability has been evaluated as per guidelines
(.....number and date of issue of the guidelines to be specified) and is
shown against the relevant disability in the table below:

S. No	Disability	Affected part of body	Diagnosis	Permanent physical impairment/mental disability (in %)
1.	Locomotor disability	@		
2.	Muscular Dystrophy			
3.	Leprosy cured			
4.	Cerebral Palsy			
5.	Acid attack Victim			
6.	Low vision	#		
7.	Deaf	€		
8.	Hard of Hearing	€		
9.	Speech and Language disability			
10.	Intellectual Disability			
11.	Specific Learning Disability			
12.	Autism Spectrum Disorder			
13.	Mental illness			
14.	Chronic Neurological Conditions			
15.	Multiple sclerosis			
16.	Parkinson's disease			

17.	Haemophilia			
18.	Thalassaemia			
19.	Sickle Cell disease			

(Please strike out the disabilities which are not applicable)

2. The above condition is progressive/non-progressive/likely to improve/not likely to improve.

3. Reassessment of disability is:

(i) not necessary, or

(ii) is recommended/after _____ years _____ months, and therefore this certificate shall be valid till (DD/MM/YY) _____

@ - eg. Left/Right/both arms/legs

- eg. Single eye/both eyes

€ - eg. Left/Right/both ears

4. The applicant has submitted the following document as proof of residence:

Nature of document	Date of issue	Details of authority issuing certificate

(Authorised Signatory of notified Medical Authority)
(Name and Seal)

Countersigned
{Countersignature and seal of the
Chief Medical Officer/Medical Superintendent/
Head of Government Hospital, in case the
Certificate is issued by a medical authority who is
not a Government servant (with seal)}

Signature/thumb impression of the person in
whose favour certificate of disability is issued

Note: In case this certificate is issued by a medical authority who is not a Government servant, it shall be valid only if countersigned by the Chief Medical Officer of the District

**NATIONAL INSTITUTE OF TECHNICAL TEACHERS TRAINING AND RESEARCH
TARAMANI, CHENNAI – 600 113.**

I _____, am a candidate who has applied for the post of Junior Secretariat Assistant (Hindi Typist) would like to avail exemption from the requirement of appearing and qualifying in Typing Test, in accordance with notice of examination, as I am permanently unfit to take the Typing Test because of Physical disability. I am herewith attaching a copy of requisite certificate issued by competent Medical Authority i.e., a civil surgeon of a Government Health Care Institution. I also undertake that I will produce all these documents in original during document verification.

Signature:

Name of Candidate:

Application No.:

Date: