



ಅಖಿಲ ಭಾರತ ವಾಕ್ ಶ್ರವಣ ಸಂಸ್ಥೆ-೫೨೦೦೦೬

अखिलभारतीय वाक् श्रवणसंस्थान :मैसूरु - 570006

ALL INDIA INSTITUTE OF SPEECH & HEARING: MYSORE – 570006

An Autonomous body under the Ministry of Health and Family Welfare,

Govt. of India, Manasagangothri, Mysore – 570 006

Phone: 0821-2502000/ 2502100, www.aiishmysore.in

ವಿಜ್ಞಾನಸಂಖ್ಯಾ/ **ADVERTISEMENT No. 14/2025**

ದಿನಾಂಕ/Dated: **August 21, 2025**

AIISH, Mysore invites applications for Speech & Hearing Technician posts to be filled on contractual basis at the Institute as detailed below:

| Post code | Name of the post | No. of Post | Place of Posting |
|-----------|-----------------------------|-------------|--|
| 01 | Speech & Hearing Technician | 01 | POCD-All India Institute of Speech & Hearing, Mysuru. |
| 02 | Speech & Hearing Technician | 01 | All India Institute of Medical Sciences, Bhopal. |
| 03 | Speech & Hearing Technician | 01 | All India Institute of Medical Sciences, Rajasthan. |
| 04 | Speech & Hearing Technician | 01 | All India Institute of Medical Sciences, Rishikesh. |
| 05 | Speech & Hearing Technician | 01 | All India Institute of Physical Medicine & Rehabilitation, Mumbai. |
| 06 | Speech & Hearing Technician | 01 | District Hospital & Community Health Center, Chungathara, Kerala. |
| 07 | Speech & Hearing Technician | 01 | Gandhi Medical College Bhopal, Madhya Pradesh. |
| 08 | Speech & Hearing Technician | 01 | Government Institute of Medical Sciences Noida, Uttar Pradesh. |
| 09 | Speech & Hearing Technician | 01 | Government Medical College and Hospital, Surguja, Chattisgarh. |
| 10 | Speech & Hearing Technician | 01 | Indira Gandhi Institute of Medical Sciences, Patna. |
| 11 | Speech & Hearing Technician | 01 | Indira Gandhi Medical College, Shimla. |
| 12 | Speech & Hearing Technician | 01 | Koppala District Teaching Hospital, Karnataka. |
| 13 | Speech & Hearing Technician | 01 | Loknayak Hospital, New Delhi. |
| 14 | Speech & Hearing Technician | 01 | Mahatma Gandhi Memorial Medical College, Indore, Madhya Pradesh. |
| 15 | Speech & Hearing Technician | 01 | Safdurjung Hospital, New Delhi. |
| 16 | Speech & Hearing Technician | 01 | Sub-Divisional Hospital, Kundapura, Karnataka. |

For the Post Code 01 to16:

- Upper age limit:** Upto 45 years
- Fixed Remuneration:** Rs. 25,000/- Per month and no other allowances are admissible.
- Tenure of contractual appointment:** For a period of one year.
- Essential Qualification:** Diploma in Hearing, Language and Speech (DHLS) or Diploma in Hearing aid & Ear Mould Technology (DHA & ET) or its equivalent.

General Conditions / Information:

1. The filling up of the above posts shall be on need basis and **purely temporary**.
2. **The engagement of the candidates in these posts does not confer any right or title to claim a permanent appointment at this Institute.**
3. All the details furnished in the offline application will be treated as final and no changes shall be entertained.
4. **Applications without photograph, signature, and necessary certificates in support of their application shall be summarily rejected.**
5. The qualifications prescribed should have been obtained through recognized Universities / Institutions.
6. **Mere eligibility will not entitle any candidate to be called for the Skill Test /Interview / Personal Interaction. The decision of the Institute in all matters will be final. No correspondence will be entertained from the candidates in connection with the process of selection / Interview.**

The candidates should furnish all the educational qualification from the recognized University/ Institute and Experience possessed in the relevant field, over and above the minimum qualifications prescribed for consideration of their candidature.

7. ***Rehabilitation professionals shall hold a currently valid registration with RCI. RCI registration is essential for the post code 01 to 16, else your candidature will be summarily rejected.***
8. ***In case RCI Certificate is in renewal stage, candidates must produce acknowledgement letter along with previous RCI certificate along with your application.***
9. The upper age limit will be reckoned as on the last date prescribed for receipt of application. However, age can be relaxed by the Director in exceptional circumstances.
10. **Candidates should mention post code and name of the post in the prescribed application format which has been uploaded on our Institute website with passport size photo affixed, proof for DOB, experience certificates and copies of education qualification, marks list, RCI certificate and other relevant certificates, Grade conversion-if applicable with self-attestation to be submitted wherever applicable. Otherwise, the application will be rejected.**
11. The last date of receipt of application is **08.09.2025, 5:30 P.M.**
12. The appointment of the Selected candidates is subject to being found medically fit as per the requirements of the Institute.
13. Candidates applying for more than one post should submit separate applications for each post codes indicating the name of the postcode and place of posting in each application applied for. Otherwise, the application will be summarily rejected.
14. The applications received in response to the advertisement will be scrutinized and only shortlisted candidates will be considered for the further selection process.

15. *Mode of Selection: Skill test shall be conducted for the eligible candidates and the shortlisted candidates will be notified in the AIISH website. For final selection process, merit in the essential qualification shall be taken into account.*
- Further, wrong declaration / submissions of false information or any other action contrary to law shall lead to cancellation of the candidature at any stage.
16. *The Institute reserve the right to accept or reject any application without assigning any reasons thereof.*
17. *The Institute reserves the right not to empanel / waitlisted candidates (s) for future contractual vacancies.*
18. *Canvassing in any form and/or bringing in any influence political or otherwise will be treated as a disqualification for the post.*
19. *No Interim enquiries about the recruitment status will be entertained*
20. Candidates should regularly visit our website for www.aiishmysore.in for latest updates through notifications, instructions, and circulars relating to this recruitment process. No separate communication in this regard will be sent.

HOW TO APPLY:

- a) The application form may be downloaded from our website www.aiishmysore.in
- b) Envelope should be super-scribed “Application for the post of.....”, “Post Code...”.
- c) Interested candidates who meet the requirement, shall submit the **application form (hard copy) on or before 08.09.2025, 5.30 P.M** to the Office of the Chief Administrative Officer, All India Institute of Speech & Hearing, Manasagangothri, Mysore – 570 006 along with **Self attested copy** of necessary certificates in support of their **DOB proof, educational qualification certificates i.e., all semester marks list, Degree certificate, Master Degree certificate, RCI certificates, experience certificates (if necessary).** Otherwise, the application would be rejected.

Applications received after the last date or with insufficient information would not be considered.

- d) **Application fee:**

For General Category, OBC and EWS candidates – ₹118/- (i.e., ₹100/- + 18% GST)

For candidates belonging to SC/ST categories - ₹48/- (i.e., ₹40/- + 18% GST)

For women and PwBD candidates - exempted from payment of application fee.

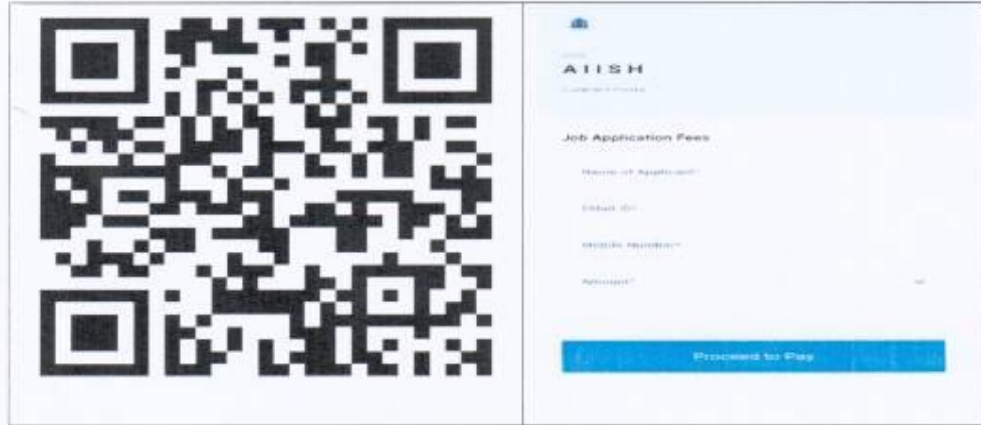
The candidates should mention the prescribed application fee details in the Application.

Application without application fee will be summarily rejected.

Candidates applying for more than one post should submit separate applications for each post codes separate application fee should be paid. Otherwise, the application will be summarily rejected.

e) **Method of payment of application fee:**

1. Mode of Payment-BHIM QR CODE:



2. Mode of Payment- Cash:

- Candidates may make the application fee payment in cash at the Institute counter. A separate cash payment must be made for each application submitted.
- The prescribed application fee details must also be clearly mentioned in the application form.
- Fees once paid will not be refunded under any circumstances, even if the recruitment is deferred for any reason.

Please mention the Remarks of the payment / Purpose of the transaction as:

➡ Application fee for the post of

➡ Application fee for the post code

Candidates has to provide the following details of the payment in the application form and attach proof of payment in the application:

Transaction ID/UTR reference no:

(Application without Transaction ID/UTR reference number will be summarily rejected)

Date of Payment:

M. P. Purohit
निदेशक/Director

Advt. No. 14/2025 dated 24.08.2025

Advertisement No 14/2025 dt 21 08 2025
Closing Date: 08.09.2025



Application fee Payment details:
Transaction ID/UTR:
Date of Payment:
Amount paid:

Recent Passport
size photo with
self attested

ALL INDIA INSTITUTE OF SPEECH & HEARING, MYSORE- 570 006

(An Autonomous Body under Ministry of Health & Family Welfare, Govt. of India)

(FILL UP SEPARATE APPLICATION FORM FOR EACH POST)

APPLICATION FOR THE POST OF:.....POST CODE:.....

1. Name of the Candidate (BLOCK LETTERS):
Mr./Mrs./Ms./Dr.

2. Gender: Male ☐ Female ☐ Transgender ☐

3. (a) Address for Communication:
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.....
.....
.....

(b) Email ID

(C) Mobile Number

(d) Aadhar No.

(e) Permanent Address

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4. (a) Date of Birth:

DD MM YYYY

(b) Age as on last date of application;
(Attach Documentary proof for DOB)

Years Months Days

(C) Place of Birth:

.....

5. Are You:

(a) a citizen of India by birth/ or by domicile:

.....

(b) If not, indicate the Nationality with documentary proof:

.....

6. Name the state to which you belong:

7. (a) Father's Name

(b) Father's Occupation:

(c) Mother's Name

(d) Mother's Occupation:

8. State whether you are a member of scheduled caste/ scheduled tribe/OBC/EWS/UR/PwBD (if so, attach documentary proof in support)

9. Have you ever been convicted by a court of law for any offence?

10. Present Employer of the candidate:

(a) In case of candidate working under Govt. whether this application sent thro' proper channel or not:

(b) In case of private/ others, indicate the name & address of the employer:

Govt ☐ Private ☐ Others ☐

Govt ☐ Private ☐ Others ☐

SC ☐ ST ☐ OBC ☐

UR ☐ EWS ☐ PwBD ☐

Yes ☐ No ☐

Govt ☐ Private ☐ Others ☐

Yes ☐ No ☐

11.(a) Education Qualification:

Note: Percentage should be calculated strictly in accordance with the Rules & Regulations of the respective university/ board (as awarded in Degree Certificate & the copy of percentage conversion certificate received from university / college should be attached along with the application. (Attach Documentary Proof).

| Examination (Name of the Board/University) | Percentage of marks obtained | CGPA | Major Subjects | Year of Passing | Equivalence of Percentage in case of CGPA with supporting documents |
|---|------------------------------|------|----------------|-----------------|---|
| SSLC / X | | | | | |
| HSC / XII | | | | | |
| Diploma / PG Dipolma Certificate (if any) | | | | | |
| Bachelor Degree | | | | | |
| Master Degree | | | | | |

Note: wherever it is not applicable make as Nil or NA.

11.(b) Other Qualifications:

Note: Sufficient Information to be provided in respect of other qualifications, other than 11(a) above, wherever applicable, as per the Recruitment Rules for respective posts.

| Course /Examination | Percentage of marks obtained | CGPA | Major Subjects | Year of Passing | Equivalence of Percentage in case of CGPA with supporting documents |
|---------------------|------------------------------|------|----------------|-----------------|---|
| | | | | | |
| | | | | | |
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12. **RCI/CAHP Registration details:** (attach documentary proof- wherever applicable)

RCI/CAHP Registration No:

Date of Issue of Certificate:

Validity of the certificate till:

13. (a) **Work Experience** (Starting from the most recent):

(If the copy of experience certificate is not enclosed then, your experience will not be counted)

| Name of the employer with full address (Indicate sector: Govt/Private) | Designation / Position | Duration | | Pay level (If in Govt.) Emoluments (Basic + DA) (If in Private) | Nature of work & Level of responsibilities |
|--|------------------------|----------|----|---|--|
| | | From | To | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Note: Copy of recent pay slip/ last pay certificate indicating clearly Basic & DA should may be attached as enclosure, failing which the application shall be treated as incomplete.

14 (a) Membership in National / International / Professional organizations:
(attached documentary proof)

| Name of the Organization | National/ International (Specify) | Postion held (if any) | From | To |
|--------------------------|---|-----------------------------|------|----|
| | | | | |
| | | | | |

14. (b) Other professional training undergone, if any, and details thereof:

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14. (c) Honours & Awards:

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15. References:

Give name & address of two professionals in the field who are in a position to comment on your professional work (The institute may write to them for a confidential assessment of the candidates' capabilities.

| Name & officer address of the Official | Designation | Contact No. & Official Email |
|---|-------------|------------------------------|
| | | Mobile: Email: |
| | | Mobile: Email: |

16. Briefly explain (within 100 words) how you are suitable for this position.

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17. Languages Known:

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|--|
| Name of the Language: (Please Tick) [Read/Write/Speak] |
| Name of the Language: (Please Tick) [Read/Write/Speak] |
| Name of the Language: (Please Tick) [Read/Write/Speak] |
| Name of the Language: (Please Tick) [Read/Write/Speak] |
| Name of the Language: (Please Tick) [Read/Write/Speak] |

18. How early you can join this Institute, if selected?

.....

19. Checklist:

| Sl. No. | Details of Enclosure | Enclosed | | | Reference to Annexure |
|---------|--|----------|----|----------------|-----------------------|
| | | Yes | No | Not applicable | |
| 1 | Proof of payment of application fee | | | | |
| 2 | Proof of age | | | | |
| 3 | SSLC | | | | |
| 4 | PUC | | | | |
| 5 | Diploma (all semester mark sheets) | | | | |
| 6 | Diploma Certificate | | | | |
| 7 | Bachelor's Degree (all semester mark sheets) | | | | |
| 8 | Bachelor's Degree Certificate | | | | |
| 9 | Master's Degree (all Semester mark sheet) | | | | |
| 10 | Master's Degree Certificate | | | | |
| 11 | RCI/CAHP Registration certificates | | | | |
| 12 | Experience Certificates | | | | |
| 13 | Details of Membership in National / International / Professional Organization. | | | | |
| 14 | Details of Honors & Awards | | | | |

DECLARATION OF THE CANDIDATE

I, hereby declare that the information given in this application is true and correct to the best of my knowledge and belief. If any information is found false, my candidature may be disqualified without prejudice to any action that may be taken under the rules.

Date:

Place:

Candidate's Signature