



National AYUSH Mission

DISTRICT PROGRAMME MANAGEMENT AND SUPPORTING UNIT

Government District Homoeo Hospital, Anjukunnu P.O,
Mananthavady, Wayanad – 670645

email address : namwayanad@gmail.com

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Phone: +91-8848002947

No.NAMWYD/A-22/2023/DPMSU

Date:19/02/2024

CAREER NOTIFICATION

A walk-Interview is scheduled for the recruitment of Full-time Yoga Instructor on contract basis at Ayush Health and Wellness Centre, National AYUSH Mission Wayanad.

Date of Interview: 26/02/2024 **Time:** 10:00 AM

Venue: District Homoeo Hospital, Anjukunnu (P.O),
Mananthavady.

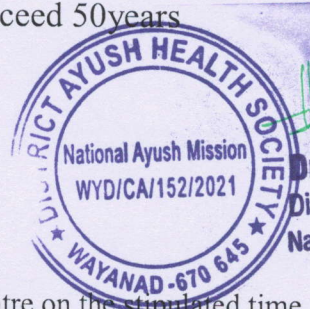
Eligibility

Post-graduation diploma in yoga of minimum of one year duration from recognized university/approved certificate course of one year duration in yoga from a recognized University/Govt. Department/Diploma in Yoga Teachers Training by SRC/BNYS/ BAMS/ MSc Yoga/ MPhil Yoga from recognized University.

No.of Vacancy: Anticipated

AgeLimit: As on 26/02/2024 not exceed 50 years

Consolidated pay: 14000/-per month.



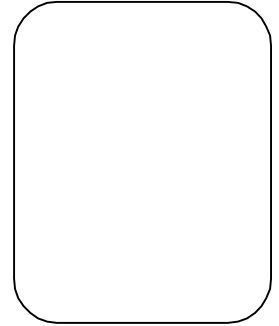
Dr. HARITHA JAYARAJ
District Programme Manager
National AYUSH Mission, DPMSU
Wayanad, Kerala

INSTRUCTIONS:

1. Candidate should report at the interview centre on the stipulated time.
2. Candidate should submit original and self-attested copies of certificates to prove age, qualifications and any other relevant documents.
3. Candidate should bring a recent passport size photograph.
4. If any candidate claims equivalent qualification the equivalency certificate should produce at the time of interview.
5. If 20 or more candidates appear for the interview a screening test will also be conducted.
6. Candidate should note that if the date of the interview is changed for any reason for any reason it will only be published on the website and no other notification will be given through any other means.

NATIONAL AYUSH MISSION KERALA

Applicant's Profile



Post applied for:

Name (Capital Letters) :

:

Name of Father/Husband/Guardian

:

Sex :

Age & Date of Birth (DD/MM/YY) :

Residential Address :

Address for Communication :

Phone No. (Mobile) :

Email Id :

Marital Status :

Educational Qualifications

SIN O.	Qualification	Institution & University	Year of passing

Experience

SI. No	Name of institution	Job Title	Period	No. of Years

Declaration

The above mentioned facts are true and fair to the best of knowledge and belief.

Place :

Date :

Name & Signature

