INSTITUTE OF COOPERATIVE MANAGEMENT, KANNUR

Conditions for applying for the post of Lecturer on Contract

| 1 | Name of the Post | Lecturer | | | | |
|---|---|---|--|--|--|--|
| 2 | Status | On Contract Basis | | | | |
| 3 | Initial Contract Period | 1 year (extended for further period of 2 years based on performance) | | | | |
| 4 | Number of Post (s) | 1 | | | | |
| 5 | Age Limit | Up to 65 Years as on 01.09.2025 | | | | |
| 6 | Educational and Other Qualification/Experience | i) Masters Degree with Minimum 55% marks in Cooperation/ Banking / Law ii) NET/SLET/SET qualified. iii) 2 years teaching experience in any reputed Institution. Desirable Ph. D in the concerned discipline. | | | | |
| 7 | Emoluments | A consolidated amount of Rs.40,000/- to Rs.90000/- | | | | |
| 8 | Selection/Appointment procedure | Selection/Appointment will be made on the basis of interview and presentation conducted before the Selection Committee. | | | | |

General Conditions for engagement of Lecturer will be as under:

- 1. Selection will be made on the basis of qualifications, experience & performance in the interview and presentation.
- 2. Candidate will be initially appointed for a period of 1 year. However, their performance will be assessed on yearly basis. If their performance is satisfactory they will be continued for the agreed tenure. The tenure of the contract may be extended for further period of three years on satisfactory performance. No further extension of tenure beyond 5 years is permissible.
- 3. Remuneration of such appointment would be in consolidated manner as per revised guidelines issued by NCCT dated 12.07.2024.
- 4. He /She will not be entitled to get any other allowance or terminal benefits for the service rendered on contract basis. However, TA as per Rules will be paid in case of official tour.
- 5. The offer of appointment to the selected candidates will be subject to verification of certificates/testimonials at the time of joining and on completion of other formalities.
- 6. Selected persons will be required to give an undertaking that he/she will not make any claim for regularization of his/her contract services at ICM, Kannur. Neither he/ she will have any other claim of regular service.
- 7. Lecturer shall not take up any other outside assignment of any nature during the period of engagement at ICM, Kannur.

- 8. If any declaration given or information furnished by the candidate found to be false or if the candidate is found to have willfully suppressed any material information, he/she will be liable for termination in addition to any legal action as NCCT may deem fit.
- 9. The Director, ICM Kannur reserves the right to accept or reject the applications without assigning any reason.
- 10. In case the performance of the person so appointed is found unsatisfactory, his/ her services will be terminated any time after giving one month's notice without giving any reason there of or pay in lieu thereof. Such person may also leave the contractual appointment after giving one month's notice or pay in lieu thereof if so desires.
- 11. Selected person will have to attend office at ICM, Kannur from 9.15 am to 5.45 pm on all working days (Monday to Friday) in a week. He /She will have to attend office on holidays or beyond office hours in case of exigency of work.
- 12. The nature of work includes handling of classes in Short Term training Programmes (STPs) and Higher Diploma in Cooperative Management (HDCM). The lecturer on contract must be ready to undertake training programmes either within the campus or outside as assigned by the Director. In addition, the lecturer should take up or assist the Consultancy/Project/Research Activities of the Institute.
- 13. Interested candidates may download the application from the website and forward the duly filled in application to the Director, Institute of Cooperative Management, Parassinikkadavu, Kannur -670563 by Post/submit directly on or before 9th September, 2025.
- 14. The following Documents (Self attested copies) are to be enclosed along with the application.
 - i) Aadhar Card

Dated: 27/8/2025

- ii) Date of Birth Certificate
- iii) Certificates of PG and NET/SLET/SET qualifications
- iv) Service & Experience Certificate
- v) Two passport size photographs (one affixed in the application and the other to be enclosed along with application.

The above documents shall also be produced in original for the purpose of verification at the time of Interview/Joining.

DIRECTOR

Institute of Cooperative Management, Kannur

Application for engagement as Lecturer (On contract) in the Institute of Cooperative Management, Parassinikkadavu (ICMK), a unit of National Council for Cooperative Training(NCCT), New Delhi.

| 1. | Name: | | | | | | | | | | |
|-------------------|---------|--------------------------|------------------------|--------------------|--------------|-------------------|-----------------|---------------|---------------------|--|--|
| 2. Father's Name: | | | | | | | | Paste a Photo | | | |
| 3. Date of Birth: | | | | | | | | here | | | |
| 4. | Nation | ality: | | | | | | | | | |
| 5. | Present | t addres | s (with Pincode, Tel/N | Лob No. ar | nd e-mail ad | ddress) | | | | | |
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| 6. | Perma | nent Ad | dress: | | | | | | | | |
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| 7. | Educa | tional/ | Professional Qualifica | tion: | | | ••••• | | ••••• | | |
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| | Sl. No. | | Qualification | University/College | | Year of Pa | Year of Passing | | Percentage of Marks | | |
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| 8. | Work | Experie | nce: | | | | | | | | |
| | SI. | Organisation / Institute | | Period | | | | | Remarks | | |
| | No. | | | From | То | Nature of Work | Post held | | | | |
| | 140. | | | | | VVOIR | | | | | |
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| ii) |) | | |
| | | DECLARATION | |
| hereby d | leclare | re that the particulars furnished above are true and correct to the best of my knowle | edge and |
| belief. In o | case a | any information furnished by me is found false or suppression of any information, | I may be |
| terminate | d and | d if required legal action may be taken. I have read this circular and accept all the te | erms and |
| conditions | s for e | engagement to the post applied by me. | |
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| | | | |
| | | (Signat | ure) |
| Date | | Name: | |
| | | | |

9. Reference with Designation, Address and Phone Number: