GOVERNMENT OF ARUNACHAL PRADESH AP CIVIL SECRETARIAT BLOCK -2, 3rd FLOOR HOME DEPARTMENT::ITANAGAR

No. HMB(B)-02/2019

Dated Itanagar the 18th February, 2019

ADVERTISEMENT

The Government of Arunachal Pradesh hereby invites Applications from eligible citizens of India in the prescribed Form in Annexure-A, for filling up of 01 (one) post of Chairperson and 02 (two) posts of Member for constitution of Arunachal Pradesh State Human Rights Commission.

I. Requisite Qualification for appointment of Chairperson of the Arunachal Pradesh State Human Rights Commission:

A person who has been a Chief Justice of a High Court;

- II. Requisite Qualification for appointment of Members of the Arunachal Pradesh State Human Rights Commission:
- (a) One Member who is, or who has been, a Judge of a High Court or District Judge in the State with a minimum of seven years experience as District Judge;
- (b) One Member to be appointed from amongst persons having knowledge of, or practical experience in, matters relating to human rights.
- 3. Terms of Office of Chairperson and Members of the Arunachal Pradesh State Human Rights Commission:
- (1) A person appointed as Chairperson shall hold office for a term of five years from the date on which he enters upon his office or until he attains the age of seventy years, whichever is earlier;
- (2) A person appointed as a Member shall hold office for a term of five years from date on which he enters upon his office and shall be eligible for re-appointed for another term of five years;

Provided that no Member shall hold office after he has attained the age of seventy.

(3) On ceasing to hold office, a Chairperson or a Member shall be ineligible for further employment under the Government of a State or under the Government of India.

4. Salaries, Allowances and Other Conditions of Services of Chairperson and Members of the Arunachal Pradesh State Human Rights Commission:

The Salaries, allowances and other conditions of services of Chairperson and Members of Arunachal Pradesh State Human Rights Commission shall be as per 'Arunachal Pradesh State Human Rights Commission (Salaries, Allowances and other conditions of Service of Chairperson and Members) Rules, 2017'.

5. Procedure for applying for the Posts:

All Applicants applying in response to the Advertisement must submit their applications duly filled in the prescribed proforma in Annexure-'A'.

Applications received not in the prescribed proforma will be summarily rejected.

6. Application complete in all respects alongwith 02 (two) latest passport size photographs duly signed by the applicant must be addressed to the Principal Secretary to the Government of Arunachal Pradesh, Department of Home, Government of Arunachal Pradesh, A P Civil Secretariat, Block-2, 3rd Floor, Itanagar and should reach latest by 5.00 PM on 08/03/2019.

Application received after due date will not be accepted. The Government will not be responsible for delays or for any reasons whatsoever. The envelop containing the application shall be superscripted 'Application for the Post of Chairperson/Members, Arunachal Pradesh State Human Rights Commission.

7. The copy of the Advertisement alongwith the 'Application Form' can be obtained from the Office of the Principal Secretary to the Government of Arunachal Pradesh, Department of Home, Government of Arunachal Pradesh, A P Civil Secretariat, Block-2, 3rd Floor, Itanagar on any working day or down loaded from the State Portal www.arunachalpradesh.gov.in.

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Sd/-(**Dr. A. C. Verma**) IAS Principal Secretary (Home) Government of Arunachal Pradesh Itanagar

Proforma for application for the post of Chairperson and Members of Arunachal Pradesh State Human Rights Commission

(Please go through relevant instruction carefully before filling up the proforma)

Photo

(No columns in the application should be left blank. Every column should contain complete information as asked for, or indicate "NIL" in case of non-applicability)

1	POST APPLIED FOR	CHAIRPERSON/MEMBER
		(Strike out whichever is not applicable)
2	Name of the Applicant (in Block Letters)	
3	Date of Birth	()
		Day/month/Year
4	Whether the applicant belongs to SC/ST/OBC/Minorities or Women	Yes/No (Strike out whichever is not applicable)
	If yes, please indicate the category	SC/ST/OBC/Minorities/Women) (Strike out whichever is not applicable)
5	Present Address	
6	Permanent Address	
7	Contact Details	
>	Telephone No.	
	Mobile No.	
	Fax No. E-mail ID	
	L-Marily	

any

8	Educational qualifications (Separate Sheet may be enclosed)	
9	Area of Eminence	
	(Separate Sheet may be enclosed)	
10	Present Occupation	
11	Detailed curriculum vitae including work experience and other achievements	
	(Please attach separate statement)	
12	In case of Direct Applicant, please give detailed justification as to how the applicant fulfills the conditions of eligibility for the post applied.	
	(Separate Sheet may be enclosed)	

DECLARATION

Ι,	the applicant hereinabove, hereby declare that th		
particulars given above and in at	tached statements are true and correct to the best of m		
knowledge and belief. I also understand that my application is liable to be rejected in case any			
of the information contained in this	application is found incorrect.		
I also express hereby my willingness to accept the offer for appointment.			
Date:	Signature:		
Place:	Name:		

ANNEXURE-A

Proforma for application for the post of Chairperson and Members of Arunachal Pradesh State Human Rights Commission

(Please go through relevant instruction carefully before filling up the proforma)

Photo	

(No columns in the application should be left blank. Every column should contain complete information as asked for, or indicate "NIL" in case of non-applicability)

1	POST APPLIED FOR	CHAIRPERSON/MEMBER
		(Strike out whichever is not applicable)
2	Name of the Applicant (in Block Letters)	
3	Date of Birth	(/) Day/month/Year
4	Whether the applicant belongs to SC/ST/OBC/Minorities or Women	Yes/No (Strike out whichever is not applicable)
	If yes, please indicate the category	SC/ST/OBC/Minorities/Women) (Strike out whichever is not applicable)
- 5	Present Address	
6	Permanent Address	
7	Contact Details Telephone No. Mobile No. Fax No. E-mail ID	

8	Educational qualifications	
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	achievements	
}		
	(Please attach separate statement)	
12	In case of Direct Applicant, please give	
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	(Separate Sheet may be enclosed)	

DECLARATION

	I,	, the applicant hereinabove, hereby declare tha	it the
partic	ulars given above and in attached	statements are true and correct to the best of	f my
know	edge and belief. I also understand th	at my application is liable to be rejected in case	e any
of the	information contained in this applica	tion is found incorrect.	
	I also express hereby my willingne	ess to accept the offer for appointment.	
Date:		Signature:	
Place		Name:	

Countersigned
Head of Department Competent Authority
(only for nominated applicant)