

**J.N. INSTITUTE OF MEDICAL SCIENCES
POROMPAT, IMPHAL**

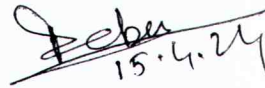
C I R C U L A R

Imphal, the 15th April, 2024

No. 01/971/MGEL/2024-JNIMS: /387 It is hereby informed to all the **contractual employees** of JNIMS and Dental College of JNIMS to submit dully filled up Form No. CPIS – 4 (1A) (copy enclosed) along with all relevant documents (i.e. educational qualification Certificate, 1st Appointment Order and joining letter) for allotment of Specific Identification Number (SIN) **on or before 31.04.2024.**

Form No. CPIS – 4 (1A) mentioned above may be download from the Official Website of JNIMS- www.jnims.nic.in

The matter may be treated as most important and time bound.


15.4.24

(Prof. L. Deben Singh)

Director, J.N. Institute of Medical Sciences

Copy to: -

1. Chief Secretary, Health & Family Welfare, Government of Manipur
2. Medical Superintendent, JNIMS Hospital
3. Principal Dental College of JNIMS
4. Deputy Director (Admin & Finance), JNIMS
5. All Head of Department....., JNIMS
6. CMO, ATC, JNIMS
7. M.O. Store, JNIMS
8. Nursing Superintendent, JNIMS
9. MRO/Section In-charge....., JNIMS
10. Section Officer (Accounts & General), JNIMS
11. System Administrator – to upload the circular and Form CPIS – 4 (1A) in the official website of JNIMS.
12. Notice Board
13. Relevant files.

Computerisation of Personnel Information System (CPIS)
for Government of Manipur

Recent
Colour
Passport Size
Photograph

Form No: CPIS – 4(1A)

(For allotment of SIN)

Sl. No.	Particulars	To be filled in
1.	Name (in Block Letters) (with Shri/Smt/Miss/Md/Mr/Mrs/MV)	
2.	Father's Name	
3.	Gender	
4.	Date of Birth (DD/MM/YYYY)	
5.	Ministry	
6.	Department	
7.	Place of Posting (Office Name)	
8.	Designation/Engaged as	
9.	Engagement Type (WC/MR/Casual/Contract/GIA/VDF/HG)	
10.	Pay Band/Grade Pay (if applicable)	
11.	Basic Pay (if applicable)	
12.	Remuneration (if applicable)	
13.	DDO Code (7 digit Code) (if applicable)	
14.	District	
15.	Date of Joining in Service/Since when engaged to the Department	
16.	Head of Account (15 digit Code) (if applicable)	
17.	Appointment/Engagement Order No.	
18.	Appointment/Engagement Order date. (DD/MM/YYYY)	
19.	Period of Engagement (if applicable)	

Note 1: Use A4 size paper

Note 2: Fields are to be computer typed neatly

Note 3: Enclose all relevant documents (Appointment/Engagement Order, Educational certificate, Posting Order, Joining report etc.)

Signature

Name of the Nodal Officer (CPIS):

(in Block letters)

Designation:

EIN:

Date:

Seal

To,

The Director,
Directorate of Management Information System,
Finance Department,
3rd floor, North Block, New Secretariat
Imphal – 795001

SIN:

(to be given by DMIS)