

ICMR-NATIONAL INSTITUTE OF EPIDEMIOLOGY
Department of Health Research, Ministry of Health and
Family Welfare, Government of India
R-127, Second Main Road, TNHB, Ayapakkam,
Chennai – 600 077

No. NIE/PE/Advt/2020/06

Date: 10.03.2020

### WALK-IN INTERVIEW / WRITTEN TEST

Candidates are invited to attend Walk-in Interview / Written Test between 09:00 AM to 10:00 AM for project post on contract basis at <u>District Health & Family Welfare</u> Office, Ek Minar Masjid Road, Behroon Quilla, Androon Quilla, Raichur, Karnataka – 584 101 on the dates mentioned against the post as detailed below (please refer website www.nie.gov.in for changes if any in the date of interview)

| Name of the post                             | Project Technical Assistant (Senior Treatment Supervisor)  |  |  |
|--|--|--|--|
| Date of Walk-in<br>Interview                 | 23 <sup>rd</sup> March 2020  |  |  |
| Number of post                               | 01 (One) (UR)  |  |  |
| Name of the Project                          | India Hypertension Control Initiative  |  |  |
| Place of posting                             | Raichur, Karnataka   |  |  |
| Essential Qualification                      | Graduate in Sociology / Social Work / Social Sciences / Statistics / Biostatistics / Life Sciences from a recognized University with three years work experience in public health project / health care management from a recognized institution |  |  |
|  | (OR)  Master's degree in Sociology / Social Work / Social Sciences / Statistics / Biostatistics / Life Sciences / Public Health / Epidemiology   |  |  |
| Desirable<br>Qualification and<br>Experience | Knowledge of literature review, data handling, analysis and interpretation, report writing with evidence of paper publications     Knowledge of statistical software(s)  |  |  |
| Emoluments                                   | Rs. 31,000/- per month   |  |  |
| Age Limit                                    | UR – 30 years  |  |  |

| Nature of Duties  | <ul> <li>Assist PI in project management</li> <li>Data analysis and manuscript preparation</li> <li>Visit to study sites for data collection and monitoring</li> <li>Coordinate with staff in field sites</li> <li>Any other work assigned by the Director / PI / Co – PI / Superior Officer</li> </ul> |
|---|---|
| Duration 01 year (Extendable based on the performance and requirements) |   |

#### Instructions to the candidates:

- 1.Bring the filled in application with one set of photocopy of qualification and experience and other testimonials.
- 2. Candidate should submit all certificates / testimonials in original for verification. Candidates who fail to bring the Original Certificates for written test / Interview will not be considered.
- 3. Retrenched Government Employees, Departmental Candidates (including projects) and Ex-Servicemen in accordance with the instructions issued by the Central Government from time to time. Age concession to the extent of service rendered in other research projects will also be admissible for experienced and skilled persons.
- 4. Experience certificate should clearly state the nature of work during the period of employment.
- 5. No-Objection Certificate from the current employer (for Govt./AB/PSU Servants only).
- 6. The post is Contractual for the duration offered. The appointment may be renewed after every specific period of time subject to satisfactory performance and project requirement.
- 7. The incumbents selected will have no claim for regular appointments under NIE/ICMR or continuation of his/her services in any other project.
- 8. TA/DA will not be paid by NIE for attending the written test/ interview.
- 9. The Director, ICMR-NIE reserves the right to increase or decrease the number of posts or cancel the recruitment or re-advertise the posts, without assigning any reasons thereof, no further correspondence will be entertained in this regard.
- 10. Any further information may be downloaded from ICMR-NIE website which will be updated from time to time.
- 11. Date of Walk-in Interview may be changed due to administrative reasons, hence, candidates are advised to check website before appearing Walk-in Interview.

The Director/Selection Committee has the right to accept / reject any application without assigning any reason thereof.

Canvassing and bringing pressure in any form for short listing, interview and employment will be a disqualification and barred from selection process.

DIRECTOR

# ICMR-NATIONAL INSTITUTE OF EPIDEMIOLOGY

Second Main Road, TNHB, Ayapakkam, Chennai – 600 077

|  | RECENT      |
|--|-------------|
| Application for the post:  | PASSPORT    |
|  | GIGE GOLOUP |
| Description of the second of t | SIZE COLOUR |
| Project:   |             |
|  |             |
|  |             |

| 1) | Name (full in block letters)                                      |  |  |  |
|----|---|--|--|--|
| 2) | Father's Name   |  |  |  |
| 3) | Date of birth (dd/mm/yyyy) &Age as on closing date of application | DDMMYEAR Years   |  |  |
| 4) | Sex   |  |  |  |
| 5) | Applying under SC /ST / OBC/EWS category                          | OC / SC /ST / OBC/EWS (Circle the appropriate)  Community                          |  |  |
| 6) | Are you Physically handicapped                                    | YES /NO  |  |  |
| 7) | Address for communication with pin code                           | Applicant Name:  Son/of:  Door No:  Street:  Village:  Post:  District:  Pin code: |  |  |
| 8) | Mobile / Phone No. for contact                                    |  |  |  |
| 9) | Email ID, if available  |  |  |  |

# 10) Educational Qualifications

| No. | Exam Passed | Board / University | Year of<br>Passing | % of Marks |
|-----|-------------|--------------------|--------------------|------------|
|     |             |                    |                    |            |
|     |             |                    |                    |            |
|     |             |                    |                    |            |
|     |             |                    |                    |            |
|     |             |                    |                    |            |
|     |             |                    |                    |            |

# 11) Experience

| No | Name of the<br>Institution | Nature of employment* | Date of joining | Date of<br>leaving | No. of<br>years |
|----|----------------------------|-----------------------|-----------------|--------------------|-----------------|
|    |                            |                       |                 |                    |                 |
|    |                            |                       |                 |                    |                 |
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|    |                            |                       |                 |                    |                 |

<sup>\*</sup> Provide Certificate of proof in support of your claim.

## 12) Publications (only for scientist post --- attach separate sheet, if space is not enough)

| Sl.<br>No. | Title of the paper | Name of the journal | First/co/<br>corresponding<br>author | Impact<br>Factor |
|------------|--------------------|---------------------|--------------------------------------|------------------|
|            |                    |                     |                                      |                  |
|            |                    |                     |                                      |                  |
|            |                    |                     |                                      |                  |

| 14) Proje  | ects (only for scientist post  | <br> -attach senarate sheet | if space is not er | ากมฮิท)     |                                     |
|------------|--------------------------------|-----------------------------|--------------------|-------------|-------------------------------------|
| Sl.<br>No. | Name of the project            | Budget (in Rs.)             | Funding            | _           | Role: PI/Co-PI                      |
|            |                                |                             |                    |             |                                     |
|            |                                |                             |                    |             |                                     |
|            |                                |                             |                    |             |                                     |
|            |                                |                             |                    |             |                                     |
|            | rds (only for scientist post - | -attach separate sheet,     | if space is not en | ough)       |                                     |
| Sl.<br>No. | Name of the award              | Type: National/Int          | ernational etc.    | Descriptio  | n of the award                      |
|            |                                |                             |                    |             |                                     |
|            |                                |                             |                    |             |                                     |
|            |                                |                             |                    |             |                                     |
|            |                                |                             |                    |             |                                     |
|            |                                |                             |                    |             |                                     |
|            | didate, if currently work      |                             |                    |             |                                     |
| Sl.No      | Name of the Project            | Designation of<br>Candidate |                    | ract period | Signature of the Principal          |
|            |                                |                             | From               | То          | Investigator<br>for NO<br>OBJECTION |
|            |                                |                             |                    |             |                                     |
|            |                                |                             |                    |             |                                     |
|            |                                |                             |                    |             |                                     |

13) Books/Chapter (only for scientist post --- attach separate sheet, if space is not enough)

 $\mathbf{ISBN}$ 

Role: Author/Editor etc.

Sl.

No.

Title of the Book

#### 17) Whether any relative is employed in ICMR, if Yes, please give details:

| 18 | ) Any | other | info | rmation |
|----|-------|-------|------|---------|
|----|-------|-------|------|---------|

I hereby declare that the information furnished above is true, complete and correct to the best of my knowledge and belief. I understand that in the event of any of the information provided by me are found false or incorrect at any stage, my candidature / appointment shall be liable for cancellation / termination without notice or any compensation in lieu thereof.

| Place: |                       |
|--------|-----------------------|
| Date:  | Signature &           |
|        | Name of the Candidate |