



ICMR-National Institute of Malaria Research
Department of Health Research
(Union Ministry of Health and Family Welfare)
Field Station, DHS Building, Campal, Panaji, Goa- 403 001
Phone - +91 0832-2222444 / 2421406
Website: www.nimr.org.in/ Email: nimrfugoa@gmail.com

Ref: NIMR/FU/GOA/MESA/2020/ 535

Date: 08/06/2020

VACANCY NOTIFICATION FOR CONTRACTUAL POSTS

Applications are invited in the prescribed format (available on the websites of ICMR and NIMR) for the following **temporary and contractual post** at ICMR-NIMR, Field Unit, Goa through email at nimrfugoa@gmail.com up to **05:00 PM on 30.06.2020**. The appointment to the post will be initially for a period of one year or coterminous with the project whichever is earlier.

S No.	Name of Post	Monthly Consolidated Emolument	Essential Qualifications/ Desirable qualification and experience	Age limit
1.	Field Attendant (OBC)	Rs. 15,330 p.m.	Matriculation/ 10 th class Pass Desirable: Experience in Field Surveys/Mosquito sampling and collection.	Up to 25 years

PROCEDURE FOR RECRUITMENT:

1. Candidates meeting the age criteria and possessing the required qualifications, experience, etc. and willing to apply may fill the Application Form in the prescribed format only and send it to the email id: nimrfugoa@gmail.com on or before the last date and time of receipt of applications as mentioned above.
2. The list of shortlisted candidates will be displayed on the website of NIMR and these candidates will be called for interview/personal discussion.
3. In the event of more than 30 eligible candidates available for a post, a written test will be held followed by personal discussions otherwise direct personal discussions will be held.
4. Keeping in view of the lockdown and non-availability of Transport Services due to COVID-19 epidemic, the interview/personal discussion will be conducted through **Skype/video call**.

5. The candidates living in close proximity to the Institute and able to manage their own transport may also attend the interview through walk in as per date and time allotted.
6. Candidates have to submit the duly self -attested copies of proof of their age, educational qualifications, experiences, testimonials etc. **at the time of joining, if selected.**
7. Selected candidates have to bring all the documents as mentioned above **in Original while joining.**

Schedule for walk-ininterview/written test followed by personal discussion will be held at NIMR, Field Unit, Directorate of Health Services Building, Campal, Panaji, Goa-403001.

Sl. No.	Post	Date and time of interview
1	Field Attendant (OBC)	02.07.2020, 9:00 AM to 12.00 noon

Other terms and conditions for applications are given hereunder:-

1. Candidate should write “**Application for the post of _____**” in the **subject line while sending their application through email: nimrfugao@gmail.com**
2. Incomplete applications or not submitted in prescribed format or without photo and signature or received after last date shall be summarily rejected.
3. Qualifications should be from recognized Institutions/Universities only.
4. Experience in the relevant discipline/ field should be from a reputed institution/ organization recognized by the relevant authority.
5. POST QUALIFICATION EXPERIENCE i.e. experience from the date of completion of minimum essential educational qualification shall only be counted.
6. Submission of incorrect or false information shall disqualify the candidature at any stage.
7. Since the posts are purely on temporary basis, no benefit of Provident Fund, Leave Travel Concession, Medical, etc. will be available to the appointee.
8. Age relaxation is admissible to SC/ST/OBC/Ex-servicemen/ Departmental candidates including projects ‘employees as per Govt. of India/DoPT/ICMR Norms as amended from time to time.
9. Age limit and experience will be considered as on the date of receipt of Application Forms **i.e. 30.06.2020.**
10. No TA/DA will be paid for attending the walk-in-interview/ personal discussions.
11. Mere fulfilling the essential qualification / experience will not bestow any guarantee of selection.
12. Candidates employed in Govt. Service /Semi Govt./ Autonomous Bodies of State/ Central Govt. should submit a “No Objection Certificate” from their employer at the time of submission of Application Form/Written Test/walk-in-interview/personal discussions failing which they will not be allowed to appear for walk-in-interview/ personal discussions.
13. In the event of more than 30 eligible candidates available for a post, a written test will be held followed by personal discussions otherwise direct personal discussions will be held. Written test will consist of objective and multiple type questions. The level of question would be as per the essential qualification.

14. All posts are contractual basis for the duration offered. The appointment may be renewed after every specific period of time subject to satisfactory performance and requirement.
15. The above posts are filled-up on purely temporary and contractual basis & the candidates shall have no right to claim for any type of permanent employment under ICMR-NIMR or continuation of their services in NIMR or in any project.
16. The Director, NIMR has the right to accept/ reject any application without assigning any reason thereof and no correspondence/recommendation will be entertained in this matter.
17. Canvassing and bringing outside influence in any form for short listing or employment will be treated as disqualification and the candidate will be debarred from selection process.
18. In the event of selection, a candidate must produce all documents or certificates in original relating to (1) Educational qualification (2) Date of Birth (3) Experience certificates/ testimonials (4) One-self attested recent passport size photograph (5) ID Proof i.e. Aadhar/PAN/Voter ID/Driving License, etc. (6) One set of self-attested photocopies of all documents. (7) SC/ST/OBC Certificate, if applicable, for verification at the time of joining the post.
19. Candidates applying under OBC category shall submit attested copy of OBC Non-Creamy Layer Certificate in the specified format, issued within one year prior to date of walk-in- interview/ written test and or personal discussions by the appropriate authority. In case of OBC candidates, only Non Creamy Layer OBC certificate will be accepted.
20. Candidates, who fail to bring the original certificates at the time of joining, will not be allowed to join the selected post. Candidates reporting after the scheduled date/ time will also not be allowed to appear in the interview or personal discussions.
21. Bad connection/ connection failure from any side will NOT be the responsibility of the NIMR.
22. Selected candidates have to sign an agreement of contractual appointment with NIMR.
23. Any addendum/ corrigendum in respect of above vacancy notice shall be issued on the NIMR website www.nimr.org.in and no separate notification shall be issued in the print media. Applicants are requested to regularly visit the website: www.nimr.org.in so to keep them updated.
24. The Director reserves the right to increase / decrease the number of posts as per requirement.

Further, for more information please visit the website: www.nimr.org.in

Officer-in-Charge



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APPLICATION FORM

ICMR-NATIONAL INSTITUTE OF MALARIA RESEARCH

DHS Building, Campal, Panaji, Goa-403001

(Under Indian Council of Medical Research (ICMR), Govt. of India)

Please tick mark (only in one box), the post you are applying for. Use separate form if wish to apply for more than one post:

Application for the Post of: _____

Category: GEN SC ST OBC EWS EXM

1. Name of the Applicant (in CAPITAL words): _____

2. Sex: Male Female Others

3. Marital Status: Married Unmarried Divorced/ Widow

4. Father's Name : _____

5. Name of the Spouse : _____

7. Date of Birth : _____

8. Age as on last date :
Indicated above (14.05.2020)

Days	Months	Years
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9. Address for Communications : _____

Mobile No. : _____

Email: _____

10. Permanent Address: _____

: _____ PIN _____ :

_____ Telephone No. _____

Mobile No. : _____

11. Nationality : _____

12. Educational Qualification: (Enclose attested photocopies of degree/diploma certificates & mark sheets)

Examination	Subjects	Board/ Council/University	Month & Year of Passing
X th (HSC)			
XII th (HSSC)			
Diploma			
Degree			
Post Graduation			
Others			

13. Current Activities:

14. Experience: (Enclose copies of Work Experience Certificates)

Name of the Organization/Institution where worked	Present/ Previous Post	Period		Scale of Pay & Gross Pay Drawn	Nature of Work
		From	To		

(Use separate sheet if space is inadequate)

15. Knowledge of computer applications, if any, please attach certificate/diploma/degree:

16. Details of publications, if any:

17. Name and address of two referees well known with the applicant's work:

Name	Occupation or Position	Address with telephone No. & e-mail
1.		
2.		

18. Details of relatives in NIMR / ICMR if any:

Name	Post & Department	Telephone No. & e-mail

19. Any other information you wish to add:

20. Check List: (Please tick in the box given below as proof of enclosures.)
All Certificates must be attested and be attached in the following order:

- | | | |
|--|--------------------------|-------|
| (i) Certificate in support of age (High School Certificate) | <input type="checkbox"/> | |
| (ii) Degree/Diploma | <input type="checkbox"/> | |
| (iii) Experience Certificate | <input type="checkbox"/> | |
| (iv) Caste certificate (If any)..... | <input type="checkbox"/> | |
| (v) Documents relating to retrenched Govt.Employees/Departmental | <input type="checkbox"/> | |
| (Including Projects) | | |

DECLARATION

I, _____ hereby declare that the information furnished in this application form is true and correct to the best of my knowledge and belief and no related information has been concealed or suppressed. I am aware that if at any stage of recruitment/appointment any of the above statements are found to be incorrect or false or any material information or particulars of relevance have been misstated, suppressed or omitted, I am liable to be disqualified for appointment and if appointed, my appointment will be liable to be terminated.”

Place:

Date:

(Signature of the applicant)

Full Name: _____