ICMR-REGIONAL MEDICAL RESEARCH CENTRE

CHANDRASEKHARPUR, BHUBANESWAR-751023

File No:RMRCBB/Proj/NEDL-78/2022-23/1136 Dt:16/09/2022

RECRUITMENT NOTICE

Applications in Prescribed format (to be downloaded from website) specifying the 'post applied for' are invited for the following posts to be sent through email to rmrcbbonehealth@gmail.com on or before 25/09/2022 by 5.30 P.M. While applying the posts, the candidates must mention the 'project titled and post applied for' in the subject line. The interview for the posts will be held through video conferencing for which the specific date and time slot will be intimated through return email. Other details like age limit, educational qualification, selection process & how to apply are given below: -

Project entitled:- "Understanding availability of Essential Diagnostics in health care systems: identifying barriers and						
facilitators"						
PI: Debdutta Bhattacharva, Scientist-D						

Sl No	Post	No. of Vacancy Category Emoluments (INR)		Essential qualification	Desirable qualification	Age (in years)	
1.	Data Entry Operator	1	OBC	Rs.18000/month	Intermediate or 12 th pass in science stream from recognised board with DOEACC 'A' level from a recognized institute and/or 2 years experience in EDP work in Government. Autonomous PSU or any other recognized organization. A speed test of not less than 8000 key depressions per hour through speed test.	to candidates having experience on epidemiological data on infectious diseases.	28 years as on date of advertisement.

Terms and Conditions:

- 1. Age relaxation will be given to the candidates belonging to OBC category as per Govt. of India rules & ICMR norms.
- 2. Qualification & Experience should be in relevant discipline/field and from an Institution of repute. Experience should have been gained after acquiring the minimum essential qualification.
- 3. Mere fulfilling the essential qualification does not guarantee the selection.
- 4. Canvassing in any form will be a disqualification.
- 5. Consolidated salary of the post may vary from time to time.
- 6. Director, RMRC, Bhubaneswar reserves rights to consider or reject any application/candidature.
- 7. Submission of wrong or false information during the process of selection shall disqualify the candidature at any stage.
- 8. Appointment on project mode is purely temporary and candidates shall have no claim for regular appointment either in RMRC, Bhubaneswar or ICMR.
- 9. Leave shall be as per the Institutional policy for project staff.
- 10. The number of vacancies may vary according to requirement at later stage.
- 11. Similar post, if any, arises in future, may be filled up from the selection panel list.

Interested candidates with the required qualification may send the scanned copy of the filled and signed applications in the prescribed format (to be downloaded from website) given below, along with self-attested photocopies of their educational certificates by email to rmrcbbonehealth@gmail.com on or before 25/09/2022, 5:30 PM. The name of the post applied is to be mentioned in the subject line of the email.

Selected candidates will be provisionally appointed subject to submission of all documents (in original) for scrutiny and Verification.

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APPLICATION FORM

Ref. Advt. No.	te:		Post app	ied:					
Name of the Project:									
Name of the candidate:									
Father's Name/Husband's Nam	e:								
Date of Birth:					Present age: (In completed years)				
Phone No.			Email Id:		(66)		<u> </u>		
Gender: Male Female Others Category: UR ST SC OBC PWD EWS						EWS			
Maritial Status: Married	Unmarried								
Language Known: Oriya	English Hindi								
Religion:									
Present Address:									
Permanent Address:									
	EDUCAT	ION/	AL QUALIFICATION	NC					
Exam passed	Year of passing	Grade Div			Subjects				
10th / HSC									
+2 / SSC									
Graduation									
P. G									
Professional									

Ouncuination	Daaitian hald	Peri	iod	Duration in	Salary	Reasons for
Organisation	Position held	From	То	years	drawn p.m.	leaving
nployment Exchar	nge Registration No./ Ye	ear		(i	f any)	
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nployment Exchar	nge details:					
selected what per	riod would you require	to ioin the nos	t: 1 week/	15 days/1 mont	th (specify)
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lave you ever been	declared unfit by a Me	dical Board Ye	s/ No. If y	es, give details		
						
		LINIDI		NC		
			RTAKI			
•	it, the aforesaid informer undertake that in t		•			

Signature of the candidate

Date:

Place: