

**ICMR-NATIONAL INSTITUTE OF MALARIA RESEARCH
Sector 8, Dwarka, New Delhi - 110077**

The following positions are to be filled up on contract and purely temporary basis in 'MERA-India' project.

Project: - Malaria Elimination Research Alliance-India (MERA India)

1. Project Officer - (One) (UR) @ Rs. 32000/-pm

Essential Qualification: Graduate in any discipline from recognized university with five year work experience of administration/ finance and accounts work.

Desirable: Bachelor degree in Commerce from recognized university/ institution. Knowledge of computer applications. Age: upto 30 years.

2. Data Entry Operator - Grade A (One) (UR) @ Rs. 17000/-p.m

Essential Qualification: Intermediate or 12th pass from recognized board. A speed test not less than 8000 key depression per hour through speed test on computer. Age: upto 28 years.

Age limit - Relaxable for the candidates possessing experience of working in other research projects in Government/Autonomous bodies/ PSU.

Interested and eligible candidates may appear for a Walk-in-Interview together with their complete bio-data with one recent photograph and photocopies of the certificates/testimonials and the originals for verification before the Selection Committee on following dates & time at National Institute of Malaria Research, Sec-8, Dwarka, New Delhi-110077. The institute may conduct written / skill test / typing test if required.

SN.	Date	Posts	Registration time for Interview
1.	24/03/2020	Project Officer	09:30 – 10:30 AM
2.	27/03/2020	Data Entry Operator	09:30 – 10:30 AM

No TA/DA will be admissible for attending the interview.

Administrative Officer



APPLICATION FORM

ICMR-NATIONAL INSTITUTE OF MALARIA RESEARCH

Dwarka, Sector-8, New Delhi – 110077

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

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Advt. No. Admn/MERA/60/18

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

Application for the Post of:

1. Project Officer - (One) (UR)
2. Data Entry Operator - Grade A (One) (UR)

Name of Project: Malaria Elimination Research Alliance-India (MERA India)

Category: SC ST OBC GEN

1. Name of the Applicant : _____

2. Sex : Male Female

3. Marital Status : Married Unmarried

4. Father's Name : _____

5. Name of the Spouse : _____

7. Date of Birth : _____

8. Age as on last date :
Indicated above

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. 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.		

16. Details of relatives in NIREH / ICMR if any :

Name	Post & Department	Telephone No. & e-mail

17. Any other information you wish to add :

**18. 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)
- (ii) Degree/Diploma
- (iii) Experience Certificate
- (iv) Caste certificate (If any).....
- (v) Documents relating to retrenched Govt.Employees/Departmental
(Including Projects)

DECLARATION

I, _____ declare that the information furnished above is true and correct to the best of my knowledge and belief and no related information has been concealed. I am aware that if 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: