

आई. सी. एम. आर-राष्ट्रीय प्रजनन एवं बाल स्वास्थ्य अनुसंधान संस्थान
ICMR-National Institute for Research in Reproductive and Child Health
(भारतीय आयुर्विज्ञान अनुसंधान परिषद)
Indian Council of Medical Research
जहांगीर मेरवानजी स्ट्रीट, परेल, मुंबई 400012
Jehangir Merwanji Street, Parel, Mumbai 400012



No. ICMR-NIRRCH/MRHRU/DHR/2017-2018

Candidates are invited to attend Walk-In Interview on **22.07.2022 between 9:30 am to 12:30 pm** or the following post under ICMR Extra-mural Non-Institutional ad-hoc project to be filled on purely temporary basis at **Model Rural Health Research Unit (MRHRU), Dahanu, Sub District Hospital Compound, Costal Highway, Agar, Dahanu 401602, District Palghar.**

Title of Project: **“Central Sector Scheme for establishment of Model Rural Health Research Units (MRHRU)” funded by Department of Health Research**

Sr. No.	Name of the Post	No. of vacancy	Stipend	Essential qualification	Desirable	Age Limit	Duration
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
1	Multi Tasking Staff	01 (UR)	Rs. 18,000/- pm	Matriculation/High School or equivalent from recognized board	<ul style="list-style-type: none"> • Willing to work in rural areas • Knowledge of local language • More than one year experience or working in laboratory or hospital settings 	25 years	Initially upto 31.03.2023

General Instructions:

1. Age relaxation for SC/ST/OBC/PWD Candidates will be as per the government rules.
2. Qualification/degree should be from a reputed Institution/University.
3. Mere fulfilling the essential qualification/experience does not guarantee for selection.
4. Canvassing in any form will be a disqualification.
5. No TA/DA will be paid either for attending the interview or joining the post.
6. Persons already in regular time scale service under any Government Department / Organizations are not eligible.
7. Written test in the subject area will be held, if required, to shortlist candidates for the interview on the same day depending upon the number of candidates.
8. The Director & appointing authority has the right to accept/reject any application without assigning any reason and no correspondence in this matter will be entertained.
9. If the candidate is not eligible, his / her candidature will be cancelled at any stage of the recruitment process. If the candidate qualifies in the selection process and subsequently, it is found that he / she does not fulfil the eligibility criteria, his / her candidature will be cancelled and if appointed, services so obtained will be terminated without any notice or compensation
10. Please give the details of two responsible person of your locality or two references to whom you are known.
11. Candidates are advised to keep looking at the website of this Institute for any change or any other information.
12. Candidates should bring all original documents for verification along with photocopies at the time of walk-in-interview.

**ICMR-National Institute for Research in Reproductive and Child Health,
Indian Council of Medical Research,
Jehangir Merwanji Street, Parel, Mumbai 400012**

Latest Photograph
of the Candidate

BIO DATA

1. Name of the Post, applied for : _____
2. Name of the Project : _____

3. Name in full (IN BLOCK LETTERS): _____
(Name) (Surname)
4. Father's /Husband Name : _____
5. Tel./Mobile No. : _____
6. Email ID : _____
7. Address for Correspondence : _____

8. Permanent Address : _____

9. Date of Birth : _____ Age : _____
10. Whether SC/ST/OBC/General : _____ Caste : _____
11. Marital Status : Married / Unmarried
12. Educational Qualifications : _____

Sr.No.	Exam. Passed	Grade	Year of Passing	Board / University	Special Subjects

13. Work experience :

Sr.No.	Period		Post held & Scale of Pay	Name of the Employer	Reasons for leaving
	From	To			

14. Employment Exchange Registration details, if available : No. _____ Exchange _____
15. If selected what period would you require to join the post : _____
16. Have you ever been declared unfit by a Medical Board/Court Yes / No.
for appointment in any Govt. Service? (If yes, details) _____
17. I came to know of this job opportunity from NIRRH Website/Other _____
(tick one and specify details for other).

19	Name of two responsible person of your locality or two references to whom you are known:-	1) Name : _____ Address: _____ _____ _____ E-mail : _____ Contact No./ Mobile No. _____ 2) Name : _____ Address: _____ _____ _____ E-mail : _____ Contact No./ Mobile No. _____
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Declaration

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 my information being found false or incorrect at any stage, my candidature/ appointment shall be liable to cancellation / termination without notice or any compensation in lieu thereof.

Date : _____

Place : _____

Signature of the Candidate