## ICMR Funded Adhoc Research Project Department of Clinical Immunology JIPMER, Puducherry – 605006.

JIP/Clin. Immuno/ICMR/2019/2

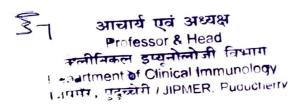
Date: 31.10.2019

## APPLICATION FOR THE POST OF RESEARCH ASSISTANT

The following position is to be filled purely on temporary basis under the adhoc research scheme / Project titled 'Humanistic and economic Burden of Rheumatoid Arthritis and its determinants in India - A prospective cohort study' at the Dept. of clinical Immunology, JIPMER, Puducherry.

| S. No. | Name<br>of the<br>Post  | Number | Educational Qualifications and Experience  | Emoluments                  | Age<br>Limit  |
|--------|-------------------------|--------|--|-----------------------------|---|
| 1.     | Research<br>Assistant-2 | 1      | Essential: Graduate in Mathematics / Statistics / Biostatistics/ Life sciences from a government recognized university/ Institute  AND  Postgraduate degree in statistics/ biostatistics/ MPH (biostatistics stream) from a government recognized university/ Institute.  AND  Two years of research experience in biostatistics and statistical software for data analysis from government/government recognized research institution / University.  Desirable:  Knowledge of patient data bases and their creation  Extensive knowledge of biostatistics and statistical software for data analysis pertaining to different aspects of human health namely clinical data, biological research data and data pertaining to health economics/health technology assessment. | Consolidated<br>Rs.31,000/- | Not more<br>than<br>30 years<br>as on<br>01/11/2019 |

Selection Procedure: Interested candidates may send their filled application with relevant bio- data given below via post on or before 8/11/2019 (Friday) before 04:30 pm. The envelope should be labeled as "Application for the post of Research Assistant- ICMR cohort study". Candidates applying for the post without completed application form & photo will be summarily rejected. Eligible candidates will be called for screening test / Interview on 15-11-2019 (Friday). No separate letters will be sent, except email communication. No TA/DA will be provided for attending the screening test.



| Application receipt           | last date | 8/11/2019 (Friday) before 04:30 pm   |  |  |
|-------------------------------|-----------|--|--|--|
| Mail ID:                      |           | icmrhraproject2019@gmail.com   |  |  |
| Screening Date test/Interview |           | 15-11-2019 (Friday).   |  |  |
| Venue                         |           | Department of Clinical Immunology 4th Floor, Superspeciality Block, JIPMER |  |  |
| Certificate                   | Reporting | 08.30 AM onwards on 15-11-2019 (Friday). The candidates                    |  |  |
| Verification                  | Time      | who report after 9:30 AM will not be considered                            |  |  |
| Test/Interview Time           |           | 10:30 AM onwards on 15-11-2019 (Friday).                                   |  |  |

| List of documents and | Filled-in application form             | Certificate of academic qualifications   | Birth certificate / Proof of DOB  | List and one copy of scientific publications |  |
|-----------------------|--|--|-----------------------------------|--|--|
| enclosures            | Valid photo ID<br>and address<br>proof | Work and research experience certificate | Community certificate (SC/ST/OBC) | Resume                                       |  |

## Note:

- The job is time bound for a period of 2 years subject to satisfactory performance and coterminous with the project, whichever is earlier.
- Applications received after the last date, 8/11/2019 (Friday) before 04:30 pm will be summarily rejected. A soft copy of the application should be mailed to: icmrhraproject2019@gmail.com
- Please provide a valid e-mail-id and mobile number. It is compulsory as further communication will only be made through e-mail/phone.

आचार्य एवं अध्यक्ष
Professor है Head
क्लीनिकल इंप्यूनोलोजी विभाग
Department of Clinical Immunology

## ANNEXURE 1: Proforma of application for Project posts in JIPMER, Puducherry - 6

|          | Name of the Post  |               |                |         |          |    | _   |    |
|----------|---|---------------|----------------|---------|----------|----|-----|----|
| 2.<br>3. | Name in Block Letters Father / Husband's Name Date of birth* (Relevant proof for age relaxation | to be attach  |                | D M M   | YYYY     |    | РНО | то |
|          | Age   |               | :              | _       | <b>-</b> |    |     |    |
| 5.       | Sex   |               | : Male         |         | Female   | L' |     |    |
| 5.       | Nationality   |               | : -            |         |          |    |     |    |
| 7.       | Address for communication including   | g Pin Code, i | n caps with To | elephor | e Numbe  | r: |     |    |
|          |   |               |                |         |          |    |     |    |
|          |   |               |                |         |          |    |     |    |
|          |   |               |                | -       |          | -  |     |    |
|          |   |               |                |         |          |    |     |    |
|          | PINCODE   |               |                |         |          |    |     |    |
|          | Ph. No.: Landline   | 1             | Mobile         |         |          |    |     |    |
|          |   |               |                |         |          |    |     |    |

- 8. Email ID:
- 9. Educational Qualifications from matriculation/SSLC\*:

| Sl. No | Educational<br>Qualification | Subjects | Marks<br>Obtained | Year of<br>Passing | Name of<br>the Board<br>University |
|--------|------------------------------|----------|-------------------|--------------------|------------------------------------|
| 1.     |                              |          |                   |                    |                                    |
| 2.     |                              |          |                   |                    |                                    |
| 3.     |                              |          |                   |                    |                                    |
| 4.     |                              |          |                   |                    |                                    |

10. Experience\*

| Dispersione |                |           |      |    |                            |
|-------------|----------------|-----------|------|----|----------------------------|
| Sl. No      | Office Address | Post Held | From | To | Experience (years, months) |
| 1.          |                |           |      |    |                            |
| 2.          |                |           |      |    |                            |
| 3.          |                |           |      |    |                            |
| 4.          |                |           |      |    |                            |
| 5.          |                |           | - 5  | *  |                            |

| <ul> <li>11. List of self – attested testimonial's*:</li> <li>1.</li> <li>2.</li> <li>3.</li> <li>4.</li> <li>5.</li> </ul>  |
|--|
| Declaration  |
| I hereby declare that all the statements made in this Application are true, complete and correct to the best of my knowledge and belief.   |
| I also acknowledge that in the event of any information provided by me being found false or incorrect detected before or after Exam/Interview during the course of my tenure as research assistant, my candidature / appointment shall stand cancelled with immediate effect.  |
| Further, I acknowledge that the appointment shall be made purely on temporary basis renewable every six months based on assessment report coterminous with the project or to a maximum of two years whichever is earlier. I declare that I have gone through all the terms and conditions of appointment. I will abide the same and I will not claim any regularization. |
|  |
| Place: Signature of the candidate Date:  |
|  |