

Email: [nin@ap.nic.in](mailto:nin@ap.nic.in)  
Website : [www.ninindia.org](http://www.ninindia.org)

Telephone: 91-40-27197200  
Fax: 91-40-27019074



आईसीएमआर - राष्ट्रीय पोषण संस्थान  
**ICMR - NATIONAL INSTITUTE OF NUTRITION**  
(Indian Council of Medical Research)  
**Near Tarnaka Metrorail Station / Flyover**  
Jamai-Osmania PO, Hyderabad-500 007, Telangana State

No./NIN/ACO/2017-18

Date: 06-07-2017

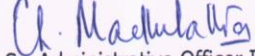
**CIRCULAR**

Applications are invited from eligible and willing candidates from amongst the Section Officers of ICMR Hqrs & its Institutes / Centres for filling up of One Post of Accounts Officer (Unreserved) in the Pay Matrix Level: 9 of 7<sup>th</sup> CPC (Pre-revised Pay Band: 3 - Rs. 15600-39100 + Grade Pay Rs. 5400/-) plus allowances admissible under the rules) on promotion basis at the National Institute of Nutrition, Hyderabad.

**Educational & Other qualifications:**

- i) Minimum 3 years Bachelor's Degree in any discipline from a recognized university.
- ii) Junior Accounts Officer with 2 years of regular service in the grade.
- iii) Section Officer having 3 years regular service with two years working experience in Finance/Accounts.

Candidates who fulfill the above eligibility criteria may submit their application in the prescribed format along with all the requisite documents viz., educational qualifications, work experience in the departments, last five years ACRs/APARs & vigilance clearance certificate, through proper channel to reach the Director, National Institute of Nutrition, Hyderabad 50007 on or before 31-07-2017.

  
Sr. Administrative Officer I/c.  
For Director-in-charge.



12. Technical/ other qualifications/courses etc., :

Sl. No.	Examination passed with group	Subjects	Board / University	Period		Percentage	Division/ Grade
				From dd-mm-yy	To dd-mm-yy		

13. Experience (with Organization name and period of experience) :

Sl. No.	Name of the post/ position	Institute/ Centre	Subject area	Period		Total Years/ Months/ Days
				From dd-mm-yy	To dd-mm-yy	

14. Languages known :

a. To speak : \_\_\_\_\_

b. To write : \_\_\_\_\_

c. To read : \_\_\_\_\_

15. Additional

information, if any:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### DECLARATION

I, hereby declare that the information furnished in the application is true, complete and correct to the best of my knowledge and belief. I am fully aware that in the event of any of the above information furnished by me being found false or incorrect at any stage, my candidature/ appointment is liable to be summarily cancelled/ terminated without any notice or compensation.

Place : \_\_\_\_\_

Signature of the Candidate : \_\_\_\_\_

Date : \_\_\_\_\_

Name (In block letters) : \_\_\_\_\_