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

JIP/Clin. Immuno/ICMR/2020/1

Date: 03.01.2020

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 of the Num Post	Educational Qualifications and Experience	Emoluments	Age Limit
1.	Research Assistant-2	Essential: Graduate in Statistics / Biostatistics/ Life sciences from a government recognized university/ Institute AND Postgraduate degree in statistics/ biostatistics/ MPH from a government recognized university/ Institute. 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, biologica research data and data pertaining to health economics/health technology assessment. • Two years of research experience is biostatistics and statistical software for data analysis from government/government recognized research institution / University.	Consolidated Rs.31,000/-	Not more than 30 years as on 14/01/202

Selection Procedure: Interested candidates may send their filled application with relevant bio- data given below via post on or before 14/01/2020 (Tuesday) 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 23.01.2020 (Thursday). No separate letters will be sent, except email communication. No TA/DA will be provided for attending the screening test.

आचार्य एवं अध्यक्ष Professor & Head क्लीनिकल इम्यूनोलोजी विभाग Department of Clinical Immunology जिपमर, पुदुच्चेरी / JIPMER, Pudyca

	t lost date	14/01/2020 (Tuesday) before 04:30 pm
Application receipt last date		icmrhraproject2019@gmail.com
Mail ID:		22 01 2020 (Thursday)
Screening	Tentative	23.01.2020 (Thursday).
test/Interview	Date	1 4 Flan Cumamaniality
Venue		Department of Clinical Immunology 4th Floor, Superspeciality
renue		Block IIPMER
C. C. T.	Reporting	09.00 AM onwards on 23.01.2020 (Thursday). The
Certificate	1 1	candidates who report after 10:00 AM will not be
Verification	Time	
		considered
Test/Interview	Time	10:30 AM onwards on 23.01.2020 (Thursday).

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 and address 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, 14/01/2020 (Tuesday) 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 & Head क्लीनिकल इप्यूनोलोजी विभाग Department of Clinical Immunolog जियमेर, पुदुच्चेरी / JIPMER, Puduche: y

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

Name of the Post

ers :	Name: DDMMYYYY r age relaxation to be attached) PHOTO		: Male Female —	Address for communication including Pin Code, in caps with Telephone Number:			1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Name in Block Letters	 Father / Husband's Name Date of birth* (Relevant proof for age relaxation to be attached) 	4. Age	5. Nationality	. Address for communication including Pin C		PINCODE	Ph No.

Email ID:

Educational Qualifications from matriculation/SSLC*: ∞ *o*.

Mobile

Landline

Name of the Board University				
Year of Passing				
Marks Obtained				
Subjects				
Educational Qualification				
SI. No	1.	2.	3.	4.

10. E

To Experience (years, months)

11. List of self – attested testimonial's*:1.	
2.	
3.	
4.	
5.	
Declaration	
Ihereby dec	lare that all the statements made in this
Application are true, complete and correct to the best of m	y knowledge and belief.
I also acknowledge that in the event of any information incorrect detected before or after Exam/Interview during assistant, my candidature / appointment shall stand cancell	g the course of my tenure as research
Further, I acknowledge that the appointment shall be made every six months based on assessment report coterminou two years whichever is earlier. I declare that I have gone appointment. I will abide the same and I will not claim any	s with the project or to a maximum of through all the terms and conditions of
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