

Annexure I



INSTITUTE OF NANO SCIENCE & TECHNOLOGY

(An Autonomous Research Institute of the Department of Science and Technology, Government of India)

Habitat Centre, Sector-64, Phase-X, Mohali-160062, Punjab

No: 14(22)/2016-INST

Date: 10.07.2019

Walk-in-Interview

Engagement of Project Staff (JRF) under SERB-WEA Project

Title of the Research Project: Cellulose-protein binary conjugates for metal detoxification

Principal Investigator: Dr. Sharmistha Sinha

Post (temp): Project staff (JRF) - 1

Qualifications *Essential:* Master's Degree in any branch of **Biology, Chemistry, Physics or Material Science or equivalent with NET/GATE/JEST qualification** (No other qualification will be considered)

Age limit: Must not be over 28 years as on **26th July, 2019**, which is relaxable for reserved categories (SC, ST & OBC) as per rules of Government of India.

Fellowship: Rs. 25,000/- +10% HRA (consolidated) (pre-revised)

Duration: Initially for six months and may be extended till the project end based upon the performance of the candidate and the availability of funds.

Date of Walk-in-Interview: 26th July, 2019 from 10.00 am to 12.00 am (**Reporting time: 9.45 am**)

Mode of Interview: Candidate should appear for interview in person. However, candidates residing far off may opt to online interview through Skype (send us Skype id to sinhas@inst.ac.in by 19th July, 2019).

Candidates are required to send scanned copy of application form and copies of certificates & testimonials in support of educational qualifications, age, category and experience etc, through email on sinhas@inst.ac.in by 19th July, 2019.

General Terms and Conditions:

1. The position is purely temporary and on contractual basis and renewable subject to satisfactory performance for a maximum till the project end. The position is **co-terminus** with the project.
2. No TA/DA will be paid for attending the interview.
3. Original documents in support of age, qualification and category etc must be presented along with the self-attested photocopies of these documents at the time of interview.

Dr. Sharmistha Sinha
Scientist D
INST, Mohali
Sector 64, Phase-10,
S.A.S. Nagar,
Mohali-160064, Punjab
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Ph No.: 0172-2210075

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APPLICATION FORM

For Office use	
Application No:	
Date of receipt:	

1. Name of the Applicant Mr./Ms.

(In block CAPITAL letters)

2. Father's/Mother's Name:

3. Gender: _____ 4. Date of Birth: _____ 5. Marital Status:

6. Spouse's Name:

7. Do you belong to GEN/SC/ST/OBC/PH category* _____

***(Please enclose self-attested copy of the certificate, if applicable)**

8. Present Mailing Address

9. Permanent Address

Pin code: _____
Telephone No: _____
E-mail ID : _____

Pin code: _____
Telephone No: _____
E-mail ID : _____

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10. Test Score Details (Please provide details of UGC/CSIR NET/GATE/Other examinations)

(Please enclose duly self-attested copies)

Test	Registration Number	Score		Rank	Qualifying Year/Month
		Percentage	Percentile		

**11. Details of academic record starting from SECONDARY (Class X) Examination:
(Self-Attested copies of the mark sheets/certificates to be enclosed)**

Degree/Exam (with discipline)	University / College / Board	Year of Passing	Percentage of Marks / CPI	Class/Grade/Rank	Subjects Taken

**12. Any other fellowship/scholarship/qualifications obtained other than covered in the form? If yes,
please provide details in separate sheet.**

13. Research/Industrial experience (with publications) in form of summer trainee, project (please provide details in separate sheet):-

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14. Any other details you want to provide to assess your candidature please provide details in separate sheet.

15. Details of two referees under whom the candidate has worked or studied

Name: _____
Designation: _____
Institute: _____
Telephone No: _____
E-mail ID : _____

Name: _____
Designation: _____
Institute: _____
Telephone No: _____
E-mail ID : _____

DECLARATION BY THE APPLICANT

I hereby declare that all the particulars furnished above are correct. I understand that my association direct or indirect with any unlawful organization is forbidden. I am aware that any incorrect information may lead to cancellation of my admission/selection. If selected for admission, I promise to abide by the rules and regulations of the Institute.

Date: _____

(Signature of the Applicant)

Place: _____

FOR OFFICE

From the copies of certificates in support of the above particulars, it is certified that the applicant is **eligible/not-eligible*** for further consideration by the Screening Committee.

**Signature of the officer in charge of
Admission**

**Give reasons.....*