



No. ICMR/NITM/Tech/01/2024/

Date: 23-09-2024

CORRIGENDUM

This is with reference to the ICMR-NITM's vacancy advertisement notification dated 21-9-2024 notified in employment news/ institute website/NCS portal etc.

Due to technical issues, **the applications are invited offline** instead of online for the posts of Technical Assistant (4 Posts) at ICMR-NITM, Belagavi. Also, the **last date of receipt of applications is extended upto 18-10-2024 upto 5:30 PM**. Application format (pdf file) alongwith Annexure I, II and III are hereby attached.

Duly filled and signed application form along with necessary essential documents and **application fees of Rs.300/- (non-refundable)** in the form of Demand Draft in favour of "Director, ICMR-NITM, Belagavi" payable at Belagavi should be sent in a sealed envelope with superscript as Post Code "_____" and "APPLICATION FOR THE POST OF TECHNICAL ASSISTANT _____" to the following address through Speed post / Registered post. The application must reach us latest by 18-10-2024 till 5:30 pm. Applications received by hand will not be considered.

**Address: The Director,
ICMR- National Institute of Traditional Medicine,
Nehru Nagar, Belagavi - 590 010.**

All other terms and conditions as advertised earlier will remain the same.

Candidate may contact us on the email id / telephone number mentioned below for clarifications if any.

- Email id: rect.nitm@gmail.com
- Tel No. 0831-2439206

Sd/-
Administrative Officer
For Director



icmr
INDIAN COUNCIL OF
MEDICAL RESEARCH

NITM
NATIONAL INSTITUTE OF
TRADITIONAL MEDICINE

APPLICATION FORM

ICMR-National Institute of Traditional Medicine
Nehru Nagar, Belagavi

Affix a
recent Self
attested
Passport Size

Post code. ----- Application for the Post of- -----

Category:

SC

ST

OBC

UR

PwD

Ex-Service

1. Name of the Applicant (in CAPITAL words): _____

2. Sex: Male Female Others

3. Marital Status: Married Unmarried Divorced/ Widow

4. Father's Name : _____

5. Name of the Spouse : _____

6. Date of Birth _____

7. Age as on 18-10-2024.

Days	Months	Years
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8. Address for Communications : _____

: _____

Mobile No.: _

Email:

9. Permanent Address: _____

PIN: _____

Telephone No. _____ Mobile No.: _____

10. Nationality :

11. Educational Qualification: (Enclose attested photocopies of degree/diploma certificates & marksheets)

Examination	Subjects	Board/ Council/University	% / Division	Month & Year of Passing
Xth (SSLC/HSC)				
XIIth (PUC – II / HSSC)				
Diploma				
Degree				
Post Graduation				
Others (M. Phil/ Ph. D)				

12. Current Activities /engagement:

13. Experience: (Enclose copies of Work Experience Certificates)

Name of the Organization/ Institution where worked and Place	Status of Organization (Central/State/ Autonomous/ PSU)	Name of the Post held	Whether permanent /contractual	Period		Scale of Pay & Gross Pay Drawn	Nature of Work
				From	To		

(Use separate sheet if space is inadequate)

14. Knowledge of computer applications, if any, please attach the certificate/diploma/degree:

15. Details of publications with impact factor, if any:

16. Name and address of two referees well known with the applicant's work:

Name	Occupation or Position	Address with telephone No. & e-mail
1.		
2.		

17. Any other information you wish to add:

18. Check List: All applicable certificates must be attested and be attached in the following order:

- Proof of Date of Birth.
- SSC / SSLC / Xth Certificate.
- HSC / PUC / XIIth Certificate.
- Mark sheets of Bachelor's Degree (Semester /year wise).
- Bachelor's Degree / Diploma / Engineering Degree Certificate (Convocation / Passing Certificate).
- Proof of Work Experience in relevant field from Government recognized organizations/Institutes. (if applicable)
- Proof of Experience for age relaxation for the candidates working in the Govt. Sector in the prescribed format – Annexure I. (if applicable)
- Proof of Category i.e. SC / ST / OBC/ PwD / Ex-Servicemen. (if applicable)
- No Objection Certificate Annexure II. (If applicable)
- Details of Experience for candidates working in ICMR Projects – Annexure III

DECLARATION

I, declare that I have read the advertisement carefully and the information furnished above is true and correct to the best of my knowledge and belief and no related information has been concealed. I am aware that if any of the above statements are found to be incorrect or false or any material information or particulars of relevance have been misstated, suppressed or omitted, I am liable to be disqualified for appointment and if appointed, my appointment will be liable to be terminated.”

Place:

Date:

(Signature of the applicant)

Full Name:

(Format of certificate to be submitted by Central Government Employees seeking age relaxation)

(To be produced on the Letter Head of the Department and to be filled by the Head of the Department in which the candidate is working)

It is certified that Mr. / Mrs. / Dr. _____ is a Central Government employee holding the post of _____ in the Pay Scale / Pay Level of Rs. _____ with 03 years regular / continuous service in the grade as _____ w.e.f. _____.

There is no objection to his appearing for the post of _____ and document verification for the said recruitment at ICMR-NITM, Belagavi.

Signature _____

Name _____

Designation _____

Tel No. _____

Office Seal _____

NO OBJECTION CERTIFICATE

(To be produced on the Letter Head of the Department and to be filled by the Head of the Department in which the candidate is working)

1. It is certified that Mr./ Mrs./ Dr. _____
(designation) _____ is working in the permanent /
regular capacity with effect from _____. The particulars furnished by
him / her in the application form are correct and he / she possesses educational
qualification and experience mentioned in the Vacancy Circular No.
_____ dated _____. This
organization has no objection in his /her applying to the post of
_____ as mentioned in the above stated circular.

2. It is certified that his / her Pay Level is _____. He / She
is drawing a Basic Pay of Rs. _____. His / Her next increment
is due on _____.

3. It is certified that in the event of selection of Mr. / Mrs. / Miss / Dr.
_____ at ICMR-NITM, Nehru Nagar, Belagavi -
590 010, he/ she shall be relieved within a period on 01 month of issue of
Appointment letter to Mr. / Mrs. / Miss / Dr. _____ by
ICMR – NITM.

Place:

Date:

Signature _____

Name _____

Designation _____

Seal of the Office _____

EXPERIENCE CERTIFICATE FOR CANDIDATES WORKING THE ICMR PROJECTS

(To be produced on the Letter Head of the Department and to be filled by the Head of the
Department in which the candidate is working)

It is certified that Mr. / Mrs. / Dr. _____ is
working at _____ as per the details
given below:

Sl. No.	Period (Initial to latest)		Designation	Name of the ICMR funded Project	Emoluments Drawn (Rs.)	Remarks
	From	To				

Please state whether the candidate has entered into the project service within the prescribed
age limit for the post for which the candidate is applying: _____ (YES/NO)

There is no objection to his appearing for the post of _____ and
document verification for the said recruitment.

Note: Please attach copies of the appointment letter and joining orders in r/o of each of the
above mentioned work experience.

Signature _____

Name _____

Designation _____

Tel No. _____

Office Seal _____