

No.A.2-66/2018-NIB

NATIONAL INSTITUTE OF BIOLOGICALS

(An Autonomous Institute under the Ministry of Health & Family Welfare)

Govt. of India

A-32, Sector – 62, Institutional Area Ph-II, NOIDA – 201309 U.P. Phone: 0120-2400022/72 Fax: 0120-2403014.

The National Institute of Biologicals, an autonomous institution under the Ministry of Health & Family Welfare, Government of India is an apex scientific Institute to ensure quality of biologicals in the country. Applications are invited for the following posts on Direct Recruitment basis:

SN	Name of Post	No. of post	Scale of pay	Max. Age limit	Category
1.	Laboratory Technician	3(Three)	Pay Matrix Level-6 Rs.35400-112400	30 Years	Gen

Eligibility criteria

Essential:

- i) B.Sc. (Biology) with Zoology & Chemistry as subjects from a recognized University
- ii) Diploma in Medical Laboratory Technology from a recognized Institute
- iii) One-vear practical experience in Medical / Biologicals Laboratory

General Information:

- Application giving particulars as per the prescribed format with a passport size photograph on the application at the space indicated with attested copies of certificates should be sent to the Director, National Institute of Biologicals (Ministry of Health & Family Welfare) A-32, Sector-62, Institutional Area Noida U.P. 201 309. The envelope containing the application form should be suberscribed with "Application for the post of"
- 2. The post carries usual allowances as admissible to Central Government Employees of corresponding status.
- 3. Age limit, Qualification and other requirements for above posts may be relaxed by the appointing authority in respect of candidates otherwise well qualified. Further the relaxation in age for SC, ST & OBC candidates shall be as per Govt. of India rules.
- 4. The crucial date for determining age limit shall be the closing date for receipt of applications from candidates.
- 5. The candidates possessing requisite qualification and experience for the post applied for will be required to appear for a written test. .
- 6. The Institute reserves the right to fill up or not to fill up any or all the posts.
- 7. Attested copies of the caste certificate as per the prescribed format of Govt. of India order shall be attached with the application.
- 8. Those employed in Central and State Government / Autonomous organization and Central & State Public Sectors undertaking/organization should apply through proper channel otherwise their application will not be considered.
- 9. The prescribed application format is available on NIB website: www.nib.gov.in.
- 10. The last date for submission of application shall be 03-12-2018

Director NIB

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APPLICATON FORMAT

Candidates should fill up application forms in his/her own handwriti	ng. All answer must be given in words and not by dashe
and dots. No column should be left blank)	

Space for Photograph

01	Name	of the	Post	an	olied f	or
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02 Name of the applicant in Full (Mr/Ms./Dr)

(In block Capital letters)

03	Add	ress:
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a.	Present				
	STD Code	Phone No	Mohile	A mail ID	

b. Permanent

04 Date of Birth

05 Nationality

06 Sex Male() Female ()

07 Marital Status

08 Father's/Husband's/Mother's Name

09 Are you member of SC/ST/OBC (Yes /No) SC() ST () OBC () Attach certificate in support of your claim issued by the Competent Authority.

10 Educational/Professional Qualification obtained (commencing with Matriculation or equivalent examination) attach attested copies of all certificates.

SN	Exam/ Degree Passed	College/ University	Subject Taken	Specialization If any	Year of passing	Class/ Division %age	Remarks

11 Professional Training

Name of the Training	Name of the Institute	Year of Passing

12 Experience

Name of the Employer/Organisation	Post Held	From	to	Nature of duties	Scale of pay and last salary drawn

- 13 Please state clearly in the light of above entries whether you met the requirements of the post (Yes/No)
- 14 Are you under any contractual obligation to serve the Central/State Government/Public Sector Undertaking/Autonomous Body? If so, please furnish full details.
- 15 Reference (Please give names and addresses of two persons who are residents of India and holders of responsible position and not relatives to whom a reference can be made regarding the applicant's professional competence, character and work. Where the candidate has been in employment, he/she should give his/her present or most recent employer or immediate superior as a reference or produce a testimonial from him /her).
- 16 If selected, what notice would you require for joining?
- 17 Any other information, the applicant may like to add.

Declaration:

I hereby declare that the information furnished and entries made in this form and the additional particulars, if any, furnished herewith by me are true to the best of my knowledge and belief and nothing has been concealed/distorted. If at any time I am found to have concealed/distorted any material information, my appointment shall be liable for termination without notice or compensation.

D	ate:	
PI	lace.	

(Signature of the Applicant)