



सी.एस.आई.आर - भारतीय रासायनिक जीवविज्ञान संस्थान

वैज्ञानिक तथा औद्योगिक अनसंधान परिषद की एक इकाई
विज्ञान एवं प्रौद्योगिकी मंत्रालय के अधीन, एक स्वायत्त निकाय, भारत सरकार
4, राजा एस. सी. मल्लिक रोड, यादवपुर, कोलकाता - 700 032



CSIR - INDIAN INSTITUTE OF CHEMICAL BIOLOGY

A Unit of Council of Scientific & Industrial Research

An Autonomous Body, under Ministry of Science & Technology, Government of India

4, Raja S. C. Mullick Road, Jadavpur, Kolkata-700 032

Advertisement No.	:	R&C/554/2022
Date of Advertisement	:	14/02/2022
Vacancy Code	:	5542214
Position	:	Project Assistant
No. of Vacancies	:	1
Walk-in Interview on	:	28/02/2022
Reporting Time	:	09.30 - 10.00 a.m.
Name of the Project	:	'Role of IGF2 in Diabetic Retinopathy.'(GAP-442).
Sponsor of the Project	:	ICMR
Project Tenure	:	Upto 25.12.2024.
Qualification required	:	Master degree in Biotechnology/ Bioinformatics from a recognized university or institute.
Desirable	:	
Age Limit	:	30 Years.
Stipend	:	Rs. 31,000/- Per month.
Terms & Conditions	:	The engagement is purely temporary & co-terminus with the project and, therefore, does not confer any right / claim implicit or explicit for regularization or absorption against any IICB / CSIR post. The age and qualifications will be reckoned as on the date of interview. The upper age limit is relaxable for SC / ST / OBC / PH and women candidates as per rules. Interested candidates fulfilling all the above conditions may fill up the Application Form as per the link given below.
Download link	:	Application form

[Close](#)



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PASTE RECENT
PASSPORT SIZE
PHOTOGRAPH

Application for the Position of _____

Area of Research Interest : _____ Vacancy Code No. : _____
Advertisement No. : _____ Application No. : _____

CANDIDATE'S RESUME

Name _____

Sex
(Tick the appropriate box)

Male

Female

Others

Date of Birth _____ (DD/MM/YYYY)

Father's Name _____

Correspondence Address _____

Pin Code _____

Permanent Address _____

Pin Code _____

Res. Contact No. (Including ISD, STD) _____

Mobile / Hand Phone No. _____

e-mail I.D. _____

Category to which you belong
(Tick the Appropriate box)

General

SC

ST

OBC

EWS

Marital Status

Unmarried

Married

Widow

Divorce

Whether Physically Disabled
(Tick the Appropriate box)

No

Yes

If Physically Disabled, mention the category
(Tick the Appropriate box)

Visually Impaired

Hearing Impaired

Orthopaedically Handicapped

Are you an employee of CSIR?
(Tick the Appropriate box)

No

Yes

Whether Previously worked in IICB / CSIR
(Tick the Appropriate box)

No

Yes

If yes, please specify details _____

ACADEMIC QUALIFICATION (Ph D)

Name of the University

Date of award of PhD

Subject

Name of the Guide

Academic Qualification (Post Graduation)

Name of the Exam

Name of the Board / University

Year of Passing

Subjects Offered

Percentage of Marks

Academic Qualification (Graduation)

Name of the Exam

Name of the Board / Council

Year of Passing

Subjects Offered

Percentage of Marks

Academic Qualification (12th Standard)

Name of the Exam

Name of the Board

Year of Passing

Subjects Offered

Percentage of Marks

Academic Qualification (10th Standard)

Name of the Exam

Name of the Board

Year of Passing

Subjects Offered

Percentage of Marks

Other Qualification

Name of the Exam

Name of the Board / University

Year of Passing

Subjects Offered

Percentage of Marks

Technical Qualification

Name of the Course

Name of the Board / University

Year of Passing

Percentage / Grade

Qualifying Examination Passed (NET - JRF / DBT -JRF / ICMR - JRF / DST-INSPIRE / GATE / GPAT / Others)

Name of the Examination Passed

Roll No.

Month & Year of Passing

Work Experience

Name of the Organization

Whether Pvt. / Govt., etc. ?

Date of Joining

Date of Leaving

Scale of Pay

Total Remuneration (Per Month)

Details of Work Profile

Research Experience

Name of Organization

Date of Joining

Date of Leaving

Details of Research Work Done

Details of Awards Received

Title of the Paper

Name of the Journal

Date of Publication

Impact Factor

Details of Awards Received

Name of the Award

Name of the Issuing Organization

Year of Receiving

Others

Are you related to any Employee of CSIR/IICB ? No Yes
(Tick the appropriate box)

If yes, please mention the Name of the employee

Designation of the Employee

Institute / Lab where he / she is working

Relationship with you

Any Other Relevant Information

Details

Extra Curricular Activities

Proficiency in Sports
(Tick the Appropriate box)

<input type="checkbox"/> Cricket	<input type="checkbox"/> Volley Ball	<input type="checkbox"/> Football	<input type="checkbox"/> Athletics
<input type="checkbox"/> Chess	<input type="checkbox"/> Bridge	<input type="checkbox"/> Carrom	<input type="checkbox"/> Badminton
<input type="checkbox"/> Table Tennis	<input type="checkbox"/> None		

Any Other (Please Specify)

Level of Proficiency
(Tick the Appropriate box)

<input type="checkbox"/> Represented School	<input type="checkbox"/> College	<input type="checkbox"/> University
<input type="checkbox"/> District	<input type="checkbox"/> State	<input type="checkbox"/> Country

Specify details of your achievements in sports

Proficiency in Cultural Activities
(Tick the Appropriate box)

<input type="checkbox"/> Music	<input type="checkbox"/> Dance	<input type="checkbox"/> Drama
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Any Other (Please Specify)

Specify details of your Cultural achievements

DECLARATION OF THE CANDIDATE

I hereby declare that all the statements made in this application are true and correct to the best of my knowledge and belief. I understand that in the event of particulars or information given herein being found false or incorrect, my candidature for the post is liable to be rejected or cancelled and if they are found to be false after my appointment then my services are liable to be terminated without any notice to me.

Date :

(Signature of the Candidate)