

GOVT. OF JAMMU & KASHMIR
SHER-I-KASHMIR INSTITUTE OF MEDICAL SCIENCES,
SOURA, SRINAGAR – 190011
DEPARTMENT OF MICROBIOLOGY

ADVERTISEMENT NOTICE

Applications are invited for the post of Laboratory Technician in ICMR funded project entitled “**Strengthening of ILI/SARI surveillance for human respiratory viruses (Influenza viruses; Respiratory Syncytial Viruses and SARS-CoV-2)**”. Applications as per the attached format with requisite certificates/documents shall reach the office of undersigned by hand before **Tuesday, 23rd of January 2024 up to 4:00 PM.**

Application form to be downloaded from SKIMS website: <https://www.skims.ac.in/>

| Name of the post | No. of posts | Essential qualification and experience | Age limit | Name of the project | Remuneration |
|-----------------------|--------------|--|-----------------------------|---|------------------------|
| Laboratory Technician | 01 | 12 th pass in science subjects and two years diploma in Medical Laboratory Technology or BSc MLT. Desirable: Candidates having experience of working in a Virology laboratory | Upper age limit is 30 years | Strengthening of ILI/SARI surveillance for human respiratory viruses (Influenza viruses; Respiratory Syncytial Viruses and SARS-CoV-2). | As per ICMR Guidelines |

Terms and Conditions:

1. The post will be on a contract basis initially for a period of 3 months extendable on the basis of satisfactory work and conduct reported by the Principal Investigator.
2. It may be noted that the post is purely temporary and contractual in nature, the candidates will have no claim for regular appointments under the above project or continuation of his/her services in any other project. Also, the candidate cannot claim for any regular appointment at this Institute after termination of the project.
3. The appointment can be terminated with one month notice from either side without assigning any reason.
4. No TA/DA will be paid for attending the interview.
5. Qualification and experience should be from a recognized Institution.
6. Experience will be counted only after completion of minimum education qualification.
7. Mere fulfilling the essential qualification does not guarantee for the interview call and selection.



Dr. Bashir Ahmad Fomda
Professor & Head/PI

No: SIMS-148/01-2024- 41
Dated: 16-01-2024

Copy to:

1. Dean Medical Faculty, SKIMS.
2. Assistant Engineer (Network & Maintenance) SKIMS for its uploading on SKIMS Website.
3. PS to Director SKIMS & EOSG for information to Director.
4. Office Copy.



Government of Jammu & Kashmir
Sher-i-Kashmir Institute of Medical Sciences Srinagar
Department of Microbiology

APPLICATION FORM FOR ICMR FUNDED PROJECT

Project title: Strengthening of ILI/SARI surveillance for human respiratory viruses (Influenza viruses; Respiratory Syncytial Viruses and SARS-CoV-2).

APPLICATION FOR THE POST OF: _____

Recent passport
size photograph

Advt. Notification No: _____ **Date:** _____

(To be filled in by the candidate in BLOCK LETTERS)

I. **Name:** _____

II. **Fathers/Husbands/Guardians Name:** _____

III. **Permanent Home address:** _____

_____ **PIN code** _____

IV. **Address for Correspondence** _____

_____ **Pin code** _____

V. **D.O.B:** _____ **Years** _____ **Months** _____ **Days** _____

VI. **Gender:** Male () Female () **Marital Status:** Married () Unmarried ()

VII. **Whether presently employed /working (give details if yes) or not** _____

VIII. **Contact No: Mobile:** _____ **E-mail ID:** _____

IX. **Academic Qualification:**

| S.No. | Course | Subject | Name of University/college | Year of passing | %age |
|-------|--------|---------|----------------------------|-----------------|------|
| | | | | | |
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| | | | | | |
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X. Experience

| S. No | Name of Institution | From | To | Total period |
|--------------|----------------------------|-------------|-----------|---------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Date:

Signature of the candidate

Declaration by the candidate:

I hereby declare that:

- a) The statements made, information furnished in this application form and the enclosure submitted by me are true and correct;
- b) I have not concealed any information and in the event of any of the particulars/information given herein above is found incorrect or false, my candidature for the Interview/entrance examination may be cancelled.
- c) In the event any wrong statement/discrepancy is found at the time of admission or at later stage, my admission/selection may be cancelled.

Signature of the candidate

Date:

Declaration by the Father/Husband/Guardian:

I have fully read the information furnished by my son/daughter/wife and affirm that it is correct and true to the best of my knowledge. In case the information furnished above is found incorrect P.I shall be at liberty to initiate legal proceedings against him/her. And terminate her appointment from the said project

Sig. of the candidate's

Father/Husband/Guardian

Date:

Enclosures to be submitted along with this form: (Self attested copies of the following certificates).

Tick mark in the box for the enclosed certificate.

- | | |
|---|--|
| 1. () Marks cards of 12 th & Other Degree's/Diploma | 2. () Graduation Degree/Diploma certificate |
| 3. () Master's/Others | 4. () Date of Birth Certificate |
| 5. () Domicile Certificate | 6. () Experience certificate |

Total No. of enclosures: