

भारतीय कृषि अनुसंधान परिषद केन्द्रीय समुद्री मात्स्यिकी अनुसंधान संस्थान (कृषि अनुसंधान एवं शिक्षा विभाग, कृषि मंत्रालय,भारत सरकार)



[Department of Agricultural Research and Education, Ministry of Agriculture, Govt. of India]



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Interview for the post of Young Professional-I

An interview for selection of Young Professional-I purely on Temporary/contractual and coterminus basis is scheduled to be held at ICAR-Central Marine Fisheries Research Institute (ICAR-CMFRI), Kochi – 682 021. Eligible candidates fulfilling all requirements are advised to mail their resume cmfricclab@gmail.com along with scanned copies of the original supporting documents on or before 25.07.2024 for screening. Shortlisted candidates will be intimated by e-mail on 26.07.2024. Only those who receive interview call may appear for the interview on the specified date and time at ICAR-CMFRI, Kochi.

Details of post and qualifications are as under:

Name of the Post	Young Professional-I
Date and Time of Interview	29.07.2023 at 11.00 AM
	ICAR-Central Marine Fisheries Research
	Institute, Near High court of Kerala, P.B No.
	1603, Kochi-682018
No. of vacancies	One
Place of post	ICAR-CMFRI, Kochi
Nature and duration of the Post	Purely on temporary basis for a period of one
	year
Age limit	Minimum 21 and maximum 45 years with
	relaxation as per rules
Emoluments	Rs. 30,000 p.m. (consolidated)
Educational qualification and Experience	Essential: B. Sc. degree in Microbiology
	Desirable: M. Sc. Degree in Microbiology with
	minimum of 3 years research experience in
	fish cell culture, virology and molecular
	biology

Terms and Conditions:

1.All the original certificates from 10th standard onwards must be sent in scanned form to cmfricclab@gmail.com on or before 25th July 2024. The applicants would not be allowed to appear for the interview without these certificates. Candidates should produce a valid ID proof (original) at the time of interview.

- 2.Concealing of facts or canvassing in any form shall lead to disqualification or termination.
- 3. The competent authority has the right to terminate without assigning any reason at any time.
- 4. No TA/DA will be paid for appearing for the interview.
- 5.If any of his/her near or distant relative is an employee of the ICAR-CMFRI, the candidate intending to attend the interview has to declare his/her name, designation, nature of duties, relationship in writing as detailed in ANNEXURE-II, and communicate to the undersigned by post or through e-mail at cmfricclab@gmail.com on or before 25th July 2024.
- 6.All the candidates are required compulsorily to furnish the declaration as detailed in ANNEXURE-I and ANNEXURE-II duly signed and submit on or before 25th July 2024.
- 7. Candidates should produce the No Objection Certificate from their present employer, if any.
- 9. Decision of the Director, ICAR-CMFRI will be final and binding in all respects.
- 10. The selected candidates shall not claim for any regular appointments at this institute as the above positions are purely contractual, non-regular and time bound

Annexure-I

Paste a

(In	Block Letters)				l	ste a ssport size
2. Father/ Husband's Name :				pho	otograph	
	nether belongs to SC/ ST BC/ General	7/:				
4. Dat	te of Birth (DD/MM/YY)	(Y) :				
5. Age	e on 1 st July 2024 :					
6. Sex	6. Sex (Male / Female/Others) :					
7. Pre	7. Present Address (with PIN code) :					
	a. For Correspondence :					
	b. Permanent address :					
8. E-n	nail ID and Mobile Num	bers :				
(in ch	tails of Educational Qua ronological order, start ma/certificate courses)		onwards incl	uding additi	onal degre	e/
SI. No.	Exam/Class/ Degree/Diploma	Board/Institution/ University	Year of Passing	Subject	% Marks	Grade

1. Name of the Applicant :

10. Details of Working/ Professional Experience (if any): (particulars of all previous and present employment, list for which proof is available, enclose attested copies of experience)

Sl.No.	Position Held	Employer	Period		Total
			From	То	Experience

- 11. Are you an employee elsewhere? (If Yes, provide the details and NOC from employer):
- 13. List of Research Papers, Professional Achievements and Additional Information (if any):
- 14. Are you having Near/ Distant Relative(s) working at ICAR/ CMFRI? (If Yes, must declare it (Annexure-II) and communicate it before the interview date. If communicated or declared on the date of interview, candidate will not be interviewed. If candidates having No Near/ Distant Relative(s) working at ICAR/ CMFRI will also furnish a declaration in the format given in Annexure-II on the date of interview)
- 15. Self-declaration regarding truthfulness in application:

DECLARATION

I do hereby declare that all the statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand and agree that in the event of any information being found false/ incorrect/ incomplete or ineligibility being detected at any time before or after interview/ selection, my candidature/ appointment may be cancelled or is liable to be rejected without any notice.

Date	Signature
Place:	Name

DECLARATION

(To be submitted in advance by candidates whose other candidates will furnish it at the time of interv	• • •	
I, declare that is an employee of the Indian Council of Agricultural Fisheries Research Institute (CMFRI), Kochi, India.	•	
I, declare that I an employed in ICAR/ CMFRI, Kochi, whose name(s), declare that I an employed in ICAR/ cmfRI, Kochi, whose name(s), declare that I an employed in ICAR/ cmfRI, Kochi, whose name(s), declare that I and employed in ICAR/ cmfRI, Kochi, whose name(s), declare that I and employed in ICAR/ cmfRI, Kochi, whose name(s), declare that I and employed in ICAR/ cmfRI, Kochi, whose name(s), declare that I and employed in ICAR/ cmfRI, Kochi, whose name(s), declare that I and employed in ICAR/ cmfRI, Kochi, whose name(s), declare that I and employed in ICAR/ cmfRI, Kochi, whose name(s), declare that I and employed in ICAR/ cmfRI, Kochi, whose name(s), declare that I and employed in ICAR/ cmfRI, Kochi, whose name(s), declare that I and employed in ICAR/ cmfRI, kochi, whose name(s), declare that I and employed in ICAR/ cmfRI, whose name(s), declare t	_ , ,	
Name: Designation: Institute/Organization: Nature of duties:		
In the event of the above-cited information is found to be incorrect or concealing any facts, my candidature to the interview/ selection to the post is liable to be cancelled.		
Date	Signature	
Place:	Name	