



POSTGRADUATE INSTITUTE OF CHILD HEALTH

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(An Autonomous Institute under Govt. of Uttar Pradesh)

Advertisement No. PGICH, Noida/Neo/2024/27

Date:09.12.2024

Applications are invited from qualified candidates to fill the post of **Research Associate I** on **contract basis** for the SERB-POWER scheme of the Science and Engineering Research Board (SERB) funded project titled, “**Study of parental factors and maternal multi-nutrient levels in moderate and severe small for gestational age babies admitted in neonatal intensive care unit**” in the Department of Neonatology, PGICH.

Post	Project Associate 1
Department	Neonatology
No. of Post	01 UR
Upper Age Limit	35 Years
Mode of Selection	Interview
Qualification	Master's Degree in Natural or Agricultural Sciences/ MVSc or bachelor's degree in Medicine, Engineering or Technology from a recognized University or equivalent.
Salary	<p>a) Rs. 31000/Month as per SERB rules for the candidates who have cleared National Eligibility Tests-CSIR-UGC-NET including lecturership or GATE or a selection process through National level examinations conducted by Central Government Departments and their agencies and Institutions.</p> <p>b) Rs 25,000/- for others who do not fall under a)</p> <p>Accommodation facility if available in the Institute Campus may be provided. (HRA may be provided in addition to the above salary if accommodation is not available)</p>
Last date of submission	05.01.2025
Date of Interview	14.01.2025

1. Applications on prescribed format, duly signed by the applicant with attested copies of all supporting documents and contact details to be submitted to **neonatology.pgich@gmail.com** prior to **5 PM on 05.01.2025**.
2. Candidates to produce all relevant original documents along with self-attested photocopies of Degree/Certificates/Mark sheets and one passport size photograph with the Completed application in the prescribed format at the time of interview.
3. The corrigendum if any will be published only on the website of the Institute.

Sd- Director

APPLICATION FORMAT FOR RESEARCH ASSOCIATE-I

(Note: Attach all self attested photocopies)

Affix
passport
size photo

1. Name (In block letters) _____
2. Gender: Male / Female _____
3. Date of Birth _____
4. Marital Status: Married/Unmarried/Others _____
5. Father's/Husband Name _____
6. Mother's Name _____
7. Address (Permanent) _____

- Contact No. & email _____
8. Address for correspondence _____

9. Qualification(s)

Qualification	Board/University	Year of Passing

DECLARATION

I hereby solemnly declare and affirm that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found untrue/false/incorrect or any column left blank in my application, my candidature is liable to be cancelled/terminated, besides taking any other action deemed fit in this regard. I will have no claim for absorption after termination/completion of contract period of tenure of fellowship. I shall abide by the terms and conditions as prescribed.

Date:

SIGNATURE OF CANDIDATE