



CSIR- INDIAN INSTITUTE OF INTEGRATIVE MEDICINE
Canal Road, Jammu-180001(J&K)

Corrigendum to Advt. No.13/2019

In partial modification to this Office Advt. No.13/2019, few amendments have been done as under:-

1. **Name of the position:** The name of the position may be read as Field Assistant **instead** of Project Assistant-I (Field Assistant).
2. **Minimum Essential Qualification:** The minimum essential qualification may be read as B.Sc. in any branch of Life Science **instead** of B.Sc. in any branch of Life Science with atleast 55% marks.
3. **Stipend Per Month:** The stipend per month may be read as Rs.10,000/- + HRA **instead** of Rs.15,000/- +HRA **and**
4. **The upper age limit:** The upper age limit for the position may be read as 30 years **instead** of 28 years as on the date of Walk-in-Interview.

Other terms and conditions of the Advt. No.13/2019 remain the same.

Sd/-
Controller of Administration



Application No. _____

CSIR-INDIAN INSTITUTE OF INTEGRATIVE MEDICINE
BRANCH INSTITUTE, SANAT NAGAR,
SRINAGAR- 190005 (J&K)

**INFORMATION ABOUT THE CANDIDATE APPEARING IN WALK-IN-
INTERVIEW FOR FIELD ASSISTANT**

Advt. No.13/2019

Name of the position: _____

Date of Walk-in-Interview: 01.07.2019

Position Code: _____

Passport
Size
photograph

1. Name: _____

2. Sex (Male/Female): _____

3. Parentage: _____

4. Date of Birth: _____ (DD/MM/YYYY)

5. Age as on (01.07.2019): _____ Years _____ Months _____ Days

6. Correspondence Address: _____

Pin Code: _____

7. Mobile No. _____ 8. E-mail I.D. _____

9. Nationality: _____ 10. Religion: _____

11. Details of Educational Qualification (From 10th onward):

Sr.No	Examination	Subject	Board/University	Year of Passing	%age of marks

12. Computer Proficiency: _____

13. Category { SC/ST/OBC/PH/UR} : _____

14. Previous experience in CSIR-IIIM/CSIR Labs/R&D Organizations etc, if any:

Name of the Lab/ Instt./Organization	ID No.	Desgn./Position held	From	To

Total experience: _____ [_____ Years _____ months _____ days]

P.T.O.

15. Whether any close relative employed in CSIR-IIIM/CSIR:
(If yes, please state his/her name, designation and place of posting)

16. The source of information about this position: CSIR- IIIM Website/Friend(s) Please indicate:

_____.

DECLARATION:-

I hereby declare that the information given above is true and correct to the best of my knowledge and belief. In case the above information is found to be incorrect at any stage, my candidature may be terminated forthwith. Copies of all requisite Certificates are enclosed.

Dated : _____

Signature : _____

NB: 1. Interim Enquires will not be attended to.

2. Incomplete application will be rejected out rightly.