**ICMR-National Institute of Malaria Research**

**Sector 8, Dwarka, New Delhi-110077**

 **Adv. No. NIMR/Lib/1/2019**

### Applications are invited from candidates for Apprentices in the discipline of Library and Information Science at ICMR-National Institute of Malaria Research, New Delhi under the Apprenticeship Scheme of the Govt. of India, Ministry of HRD for a period of one year.

### Number of Apprentices: Four

### Position: Apprentice (Library)

### Essential Qualifications:

Second class Bachelor’s degree (50%) or equivalent qualification and BLIS/MLIS from a recognized University/Institute (Result declared of BLIS/MLIS on or after May, 2017 shall be considered.

### Stipend: Rs. 11500/- per month, no other allowances.

**NOTES**:

1. Candidates who have already undergone such Apprenticeship training need not apply.
2. The candidates may apply in the prescribed application form available on the website of NIMR: *http://*[*nimr.org.in*](http://www.nimr.org.in)under **notification** “vacancies” section, along with the photocopies of all certificates & mark-sheets and send them to the **Director, National Institute of Malaria Research, Sector-8, Dwarka, New Delhi-110077 on or before 24.09.2019**. Applications received after the last date will not be considered. The envelope should be superscribed as “Application for Apprentice (Library) at NIMR”.
3. Incomplete or application not in prescribed format will be summarily rejected.
4. Only short listed candidates will be called for interview.
5. Candidates will have to bring all the original documents, certificates at the time of interview.
6. No TA/DA will be paid for attending the interview.
7. The selected candidates may be required to join immediately.

 Administrative Officer

 For Director

**ICMR-National Institute of Malaria Research**

**Sector-8, Dwarka, New Delhi-110077**

**APPLICATION FORM**

Affixed Recent Pass Port

Size Photograph

1. Name of the post applied for : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Name of the applicant : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Father’s/Husband’s Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Date of birth (DD-MM-YYYY format) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Address for correspondence with mobile no. and e-mail:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. Permanent Address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. Marital Status : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Nationality : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Do you belong to SC/ST/OBC/BC ? (if so, please state clearly and attach certificate in support thereof):

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Educational qualifications :

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| S. No. | Exam passed | Board/ University | Subject studied | Month & Year of passing | % of marks |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |

1. Work experience, if any:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| S. No. | Name of the Employer | Designation | Date of joiningFrom - To | Scale of pay |
| 1 |  |  |  |  |
| 2 |  |  |  |  |

1. Any other relevant information :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Declaration:

I hereby, declare that the details specified above are true, complete and correct to the best of my knowledge and belief.

Place:

Date: Signature of the applicant