Vacancy for the Post of Research Officer (Biostatistics)

For the following temporary post in Department of Biostatistics, AIIMS, New Delhi, in an ICMR funded research project "Crohn's disease in India: A Multicentric study from a country where intestinal tuberculosis as well as Johne's disease is endemic" under Prof. V. Sreenivas.

Name of the Post	No. of	Qualification /Experience Required	Salary/Age Limit	Nature of Post
	post	•		
Research	1	1st class Master's degree in	As per	Purely
Officer		Statistics/Biostatistics/Health	ICMR	temporary for
(Biostatistics)		Statistics or equivalent with	guidelines /	the duration of
		post qualification experience	Upto 35	the ICMR
		of minimum three years in	years	project duration
		data analysis, coordination and		
		management		

Submit by registered post, your bio-data along with attached photocopies of certificates, experience certificate and testimonials in the prescribed application format (attached) to Prof. V. Sreenivas, Room No. 13, Department of Biostatistics, AIIMS, New Delhi-110029. Last date to receive the application is April 15, 2017

Note:

- 1. This position is purely temporary and engagement may be terminated at any time without notice.
- 2. The candidate engaged for the above position will have no claim for regular appointment at AIIMS.
- 3. No enquiries shall be entertained in the regard after due date.
- 4. Application must be in the prescribed format (attach along with advertisement).
- 5. Incomplete application or application without prescribed format or received after due date will not be considered.
- 6. Depending on the number of applications, only shortlisted candidates may be called for interview.

APPLICATION FORM

1) N	Name o	of the j	post:						
	2) Date of advertisement & project:								
3) Name of candidate:									
4) Date of Birth:									
5) Age:									
6) Permanent Address:									
7) Address of correspondence:									
8) Phone no:									
9) Email Address:									
10)	Quali	fication	on* (Stai	ting from	10^{th}	onwards):			
S.No. Degree		Name of	the Institution	on	Year of Passing	Percentage of Marks			
11) S.No.	Expo		e *(Post	Qualificati From	on):	То	Duties / Responsibilities		
5.1 (0.	1 050		nization	Date/Moth/Year					
12) Achievement if any:									
13)	Two references along with his/her Name, designation and contact Numbers or Email address :								
14)	I hereby declare that above information provided by me is correct to my knowledge and belief:								
	Date	•							
	Place						•••••		
							Signature of Candidate		

* : Attach all copies