

राष्ट्रीय कोशिका विज्ञान केन्द्र, पुणे
National Centre For Cell Science, Pune
An Autonomous Institute of Department of Biotechnology,
Ministry of Science & Technology, Govt. of India
NCCS Complex, S. P. Pune University Campus, Ganeshkhind, Pune – 411 007.

Website: www.nccs.res.in Email: admindept@nccs.res.in Ph:020 25708000

Advertisement No. Admin.01/2021

NCCS invites applications from Indian Nationals retired from Govt. Services / National Research Laboratory / Public Sector Undertaking etc. for the following post **purely on temporary basis:-**

1. Full Time Consultant(Instrumentation) : 1 Post.

Monthly Consultancy Fees of Rs. upto 60,000/- depending on experience.

Essential Qualifications : (a) Professionals having a Ph.D. degree in relevant subject and minimum post qualification experience of 6 years in the requisite field.

b) Retired Government employees with (i) Grade pay Rs. 6,600/- and above & (ii) at least 12 years experience in the required domain field would also be eligible for this position.

Desirable Experience : Experience in handling scientific Instruments, their maintenance & repairs including high end biomedical instruments like Confocal microscope, PCR machines, centrifuges, FACS, Gel doc. Incubators, Bio safety cabinets & other life science instruments. In depth understanding of Government procedure & rules & regulations.

Age Limit : Maximum age limit for applying is upto 62 years.

Interested candidates may send their applications in the prescribed format* along with all the necessary certificates to “The Director, National Centre for Cell Science, S.P. Pune University Campus, Ganeshkhind, Pune – 411007, on or before **04.03.2021**.

***Download Application Format from website [Notes :](http://www.nccs.res.in/index.php/carrers/staff(Under staff in career tab)</p></div><div data-bbox=)**

1. Applications received after the due date and /or without the copies of the required certificates will not be considered. Proof of experience should be submitted along with application.
2. The Director, NCCS reserve the right to enhance / reduce the number of posts and also to cancel the recruitment process.
3. No interim inquires will be entertained.
4. The posts advertised shall be need based without any commitment for its filling.
5. Canvassing in any form and / or bringing in any influence will be treated as disqualification for the post.
6. The appointment will be for a period of one year and can be extended further, at the discretion of the Director.
7. Superscribe the name of the post applied for, on the envelope.

DIRECTOR

NATIONAL CENTRE FOR CELL SCIENCE, PUNE

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Photograph
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APPLICATION FORM

1	Advertisement No.				
2	Name of the post and its Sr. No.:				
3	Name in full (in block letters)				
4	Postal Address in full with telephone No./ Mobile No. (Mandatory field)				
a)					
b)	Permanent Address with telephone No./Mobile No. (Mandatory field)				
c)	E-mail Address				
5	a) Date of Birth <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td></tr></table> dd mm yy				b) Present Age: _____ Years _____ Month
	c) Sex: Male/Female	d) Place of Birth:			
	e) Whether SC/ST/OBC/ PWD : _____ If PWD % age of disability _____	f) Married / Unmarried: _____			
	g) Nationality :-				
6.	Father's /Husband's Name, Occupation and address (if not alive state last address and occupation)				
6 a	Have you been convicted by a Court of Law? Is there legal case filed against you in a Court of				

10. References – (not acceptable from relation) – Give full name & addresses of three referees with e-mail Id and telephone Nos.	
1.	2.
3.	

11. If selected what notice would you require for joining the post:	
12. Are you going to accept minimum of the scale:	
13. Any of your relatives working in NCCS? If the answer is 'YES' give details such as Name, relation with the employee/in which section he/she is working.	
14. Additional information, if any	

I HEREBY DECLARE THAT THE PARTICULARS FURNISHED IN THIS FORM BY ME ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Date:

Place:

Signature of the candidate