

MGM SCHOOL OF BIOMEDICAL SCIENCES, NAVI MUMBAI DEPARTMENT OF CLINICAL NUTRITION

(A constituent unit of MGM INSTITUTE OF HEALTH SCIENCES)

(Deemed University u/s 3 of UGC Act 1956)
Grade "A" Accredited by NAAC
Sector 1, Kamothe Navi Mumbai-410209, Tel.No.022-27437631, 27432890

Email. sbsnm@mgmuhs.com / Website: www.mgmsbsnm.edu.in

Applications are invited on or before <u>25.08.2023</u> for the post of Laboratory Assistant for the project entitled "Molecular Diagnostics of Infectious Diseases - Let's analyze the Nucleic acids of Pathogens" funded by ICMR to be filled on purely temporary basis at Department of Medical Biotechnology, MGM School of Biomedical Sciences, MGMIHS, Navi Mumbai. All applications will be screened and only shortlisted candidates will be invited for offline interview. Shortlisted candidates will be informed regarding details of interview later.

Title of project: Molecular Diagnostics of Infectious Diseases - Let's analyze the Nucleic acids of Pathogens funded by ICMR

Sr. No.	Name of the Post	No. of vacancy	Stipen d	Essential Qualification	Desirable	Age Limit	Duration
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
1	Lab-	One	25400	Post Graduate Degree in	Experience	Below	05 year up to
	Assistant	(UR)	/- per	Biotechnology/Molecular	in	35	coterminous
			month	Biology/Genetics with good	molecular	years	of the project
				experience in Molecular	biology	-	
				Biology techniques such as	techniques/		
				PCR/Sequencing/bioinform	tissue		
				atics and immuno	culture/		
				diagnostics	histology		
					8,		

General Instructions:

- 1. Qualification/degree should be from a reputed Institution/University.
- 2. Mere fulfilling the essential qualification/experience does not guarantee for selection.
- 3. Canvassing in any form will be a disqualification.
- 4. No TA/DA will be paid either for attending the interview or joining the post.
- 5. Persons already in regular time scale service under any Government Department / Organizations are noteligible.
- 6. It may be mentioned here that incomplete applications, application not submitted in prescribed format and application without supportive documents asked for shall be summarily rejected
- 7. The Director & appointing authority has the right to accept/reject any application without assigning any reason and no correspondence in this matter will be entertained.

- 8. Please give the details of two responsible persons of your locality or two references to whom you are known.
- 9. If the candidate is not eligible, his / her candidature will be cancelled at any stage of the recruitment process. If the candidate qualifies in the selection process and subsequently, it is found that he / she does not fulfil the eligibility criteria, his / her candidature will be cancelled and if appointed, services so obtained will be terminated without any notice or compensation.
- 10. Only shortlisted candidates will be called to physical interview on scheduled date & time at MGMIHS, NewiMumbai. Details about interview will be conveyed to shortlisted candidates by email.
- 11. The above post/s are filled-up purely on contractual basis & the candidate will have no right to claim for any type of Permanent Employment under MGMIHS or at ICMR HRD or ICMR DHR continuation of his/her services in any other project
- 12. Please note that the Institute does not have residential facilities for contractual staff.
- 13. Candidates are advised to keep looking at the website of this Institute for any change or any other information.

Note: The scanned copy of filled application form will be mailed to sbsnm@mgmuhs.com .



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RECRUITMENT OF TEMPORARY PROJECT STAFF - APPLICATION FOR THE POST OFLAB-ASSITANT AT MGMSBS, KAMOTHE, NAVI MUMBAI

Paste here your

For Office Use only

Serial Number allotted to the Applicant

				size	t passport eColour tograph		
	APPLICATION	I FOR THE POST OI	F LAB-ASSISTA	NT			
1. Name of the Ca	andidate in full						
2. Nationality							
3. Mother Tongu	e						
4. Date of Birth			Date	Month	Year		
5. Sex			Ма	le / Female	!		
6. Marital Status			Married / Single				
7. Category	SC / ST / OB	C / General	Please specify				
andE Mail ID							
9. Project Title							
10. Name of the F							
11. Advertisemer	nt Number with Date						
	er: Enclose photo cop ecards showing the pe	, , ,, ,	,		rk sheets/		
Name of Exam School/University		Board/University	Broad subjects of study	Year of Passing	% of marks/ CGPA		
S.S.L.C							
H.S.C							
Graduation							

Post-Graduation			
Any other			

(Enclose self-attested photocopies)

Date:

Name and Signature of Candidate

List of Enclosures: (1)

(2)

(3)

(4)