



**icmr**  
INDIAN COUNCIL OF  
MEDICAL RESEARCH

**NIREH**  
NATIONAL INSTITUTE FOR RESEARCH  
IN ENVIRONMENTAL HEALTH

**ICMR-NATIONAL INSTITUTE FOR RESEARCH IN ENVIRONMENTAL HEALTH**

Bypass Road, Bhauri, Bhopal – 462030 (MP)  
(Under Indian Council of Medical Research (ICMR), Govt. of India)

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Advt. No. NIREH/HR/2021/10

Please tick mark (Only in one box) the post and respective project you are applying for:

Application for the Post of : {ExpPJ - 08} Project Assistant - 01 post (OBC)   
{ExpPJ - 09} Junior Research Fellow - 01 post (SC)   
{ExpPJ - 09} Project Technician-III - 01 post (SC)   
{ExpPJ - 10} Scientist-B (Medical) - 01 post (ST)

Name of Project:

(ExpPJ - 08) "Effects of Improved information and volunteer support on sorting and Segregation of solid waste at the household level in urban settings in Madhya Pradesh " (PI: Dr. Vishal Diwan, Sc E) duration upto 08 months

(ExpPJ - 09) "Unraveling the potential of natural and nano-formulated tea polyphenols against pesticide induced DNA damage and exploring its bioavailability" (PI: Dr. Devojit Kumar Sharma, Sc-C) duration upto 03 years

(ExpPJ-10) "Evaluation of health impact of the improved housing conditions on under five year children in the socioeconomically underprivileged families: a one year follow up study " (PI: Dr. Yogesh Sabde, Sc E) duration upto 30.09.2022

1. Name of the Applicant : \_\_\_\_\_

2. Sex : Male  Female

3. Category :  SC  ST  OBC  GEN  ExSM

4. Marital Status :  Married  Unmarried

5. Father's /Spouse Name : \_\_\_\_\_

6. Date of Birth : \_\_\_\_\_

7. Age as on 18<sup>th</sup> March 2021 :

Days	Months	Years

8. Address for Communication : \_\_\_\_\_  
: \_\_\_\_\_  
: \_\_\_\_\_ PIN \_\_\_\_\_.

Mobile No. : \_\_\_\_\_

Email : \_\_\_\_\_

9. Permanent Address : \_\_\_\_\_  
: \_\_\_\_\_ PIN \_\_\_\_\_

\_\_\_\_\_ Telephone No. \_\_\_\_\_

Mobile No. : \_\_\_\_\_

10. Nationality : \_\_\_\_\_

11. Educational Qualification: (Enclose self attested photocopies of degree/diploma certificates & mark sheets)

Examination	Subjects	Board/ Council/University	Month & Year of Passing
X <sup>th</sup> (HSC)			
XII <sup>th</sup> (HSSC)			
Diploma			
Degree			
Post Graduation			
Others			

12. Current Activities:

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13. Experience:(Enclose self attested scanned copies of Work Experience Certificates issued by the competent authority)

Name of the Organization/Institution where worked	Post	Period		Scale of Pay & Gross Pay Drawn	Nature of Work
		From	To		

(Use separate sheet if space is inadequate)

14. Name and address of two referees well known with the applicant's work :

Name	Occupation Position or	Address with telephone No. & e-mail
1.		
2.		

15. Details of relatives in NIREH / ICMR if any :

Name	Post & Department	Telephone No. & e-mail

16. Any other information you wish to add:

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17. Check List:(Please tick in the box given below as proof of enclosures.)  
All Certificates must be attested and be attached in the following order:

- (i) Certificate in support of age (High School Certificate).....
- (ii) Higher Secondary/Degree/PGD/Diploma .....
- (iii) Experience Certificate .....
- (iv) Caste certificate (If any).....
- (v) Documents relating to retrenched Govt. Employees /Departmental.....   
(Including Projects)

**DECLARATION**

I, \_\_\_\_\_ declare that the information furnished above is true and correct to the best of my knowledge and belief and no related information has been concealed. I am aware that if any of the above statements are found to be incorrect or false or any material information or particulars of relevance have been misstated, suppressed or omitted, I am liable to be disqualified for appointment and if appointed, my appointment will be liable to be terminated.”

Place: .....

Date: .....

(Signature of the applicant)

**Full Name:**