SPICES BOARD

(Ministry of Commerce & Industry, Govt.of India) Sugandha Bhavan, N.H. By Pass, P.B. No.2277 Palarivattom. P.O., Kochi-682025 www.indianspices.com Tel: 0484-2333610 to 616.

Selection of Trainees in Quality Evaluation Laboratory of Spices Board at Narela Delhi [Exclusively for Scheduled Caste(SC)/ Scheduled Tribe(ST) candidates]

No. of Trainees	: Trainee Analyst(Microbiology) – 1;				
	A panel will be prepared for selection of trainees for future vacancies.				
Educational	: Trainee analyst (Microbiology): Bachelors degree in Microbiology				
Qualification	from a recognised University/ Institute.				
Eligiblitiy	: 1. The upper age limit should not exceed 25 years as on the date				
	of written test.				
	2. Those who are trained/ undergoing training in any of the				
	department of the Spices Board are not eligible.				
Tenure	: Two years.				
Stipend	: Trainee Analyst(Microbiology):Rs.20000/-per month.				
Leave Eligiblity	: One day per month.				
Date, Time & Place of	r Place of : 01.06.2022				
written test	QUALITY EVALUATION LABORATORY, SPICES BOARD SECTOR A-7,				
	PLOT NO.5, NARELA,NORTH WEST DELHI,DELHI 110040,Ph: 011 -				
	27785379				

Instructions to candidates:

Eligible candidates may send their details as in Annexure-I along with scanned copies of resume, recent passport size photo, certificates (Proof for age, education, caste certificate, etc. and experience if any) email to "sbqelnarela@gmail.com" in advance, on or before 27.05.2022

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- The email should bear the subject titled as "Application for"
- If the candidate, want to apply for more than one trainee position, separate applications may be sent for each trainee position he/she wishes to apply for.

- Applications, which are not received in the prescribed format i.e. as per Annexure-I of the notification along with the supporting documents will not be considered.
- Candidate has to mention the appropriate trainee position he/she would like apply in the application form(Annexure-I). [Example "Application for Trainee Analyst-Microbiology"]
- Candidates may sent the application as a single PDF attachment in the following order (a) Annexure-I (b) Educational qualifications(in chronological order) (c) Caste/Community certificate (d) ID proof (e) Experience certificate, if any.
- If large number of applications are received, same will be shortlisted as per the criteria as decided by Spices Board.
- Spices Board reserves the right to modify/alter/restrict/enlarge/cancel the selection process, without assigning any reason. The decision of the Board will be final and no appeal will be entertained in this matter.
- The acknowledgement of applications received by email, if in order, will be sent between 5:00 to 5:30 pm on working days.
- Candidates are advised to check opportunities/notices in Board's website <u>www.indianspices.com</u> for updates and not to rely on information from 3rd party websites.

The written test shall be conducted as per the COVID-19 protocol as per the guidelines of Ministry of Health & Family Welfare, Govt. of India.

Dated: 12th May 2022.

Director(Admn)i/c

Kochi-25.

Spices Board

Hindi version follows

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Details to be sent via email

The	detail	s may be sent by email with s	ubject as "Applicat i	ion for	,,,	
to						
1.	Nam	e:				
2.	Fathe	er/Guardian Name:				
3.	Sex:					
4.	Date	of Birth:				
5.	Mari	tal status:				
6.	Relig	gion:				
7.	Cate	gory(SC/ST):				
8.	Natio	onality:				
9.	ID pr	roof:				
10.	Phon	e no.:				
	Alternate no.:					
11.	Emai	il id:				
12.	Addr	ress for communication:				
13.	Permanent Address:					
15.		autent Hadress.				
14. Educational Qualification(Copies may be enclosed as attachment):						
Exam Specialisation/Subject			University/	Year of passing	Percentage/ GPA	
ا ا	Xaiii	Specialisation/Subject	5	Teal of passing	reiteillage/ GFA	
			Institute			
15.	Details of experience(if any)					
	(copies may be enclosed as					
	attachment):					
16	Any other relevant information:					
	11119	other refevant information.				
						
			<u>Declaration</u>			
I he	reby c	leclare that the information fu	ırnished above are t	true, complete and o	correct to the best of	
my !	knowl	edge and belief. I am in poss	session of the docur	ments in proof of th	e claim made in this	
appl	icatio	n.				
Date			(Signature)			
			, G ,			
Place:			(Name)			