

ADVERTISEMENT FOR THE POST OF DATA COLLECTOR FOR UNICEF PROJECT

UNICEF funded project titled “**Assessment of Immunization status in low performing districts of Bihar**”

Application are invited for the post **Data Collector** in Department of Community and Family Medicine, AIIMS Patna. Details are as follows:

| Sl. No | Name of the post | No. of Posts | Essential Qualification | Remuneration |
|--------|------------------|--------------|---|---|
| 1 | Data Collector | 40 | Graduate in any subject from recognized University with one year of experience in field activity or survey or data collection. Computer knowledges must. | Rs. 1,000/- per day fixed for 30 days only. |

* The appointment on these posts are purely temporary.

Age Limit:

Data Collector – 30 years. 5 years relaxation for SC/ST/OBC/Female candidates as Govt. of India Rules.

Last date for the submission of application form: Desirous candidate who full fill the essential qualification should submit the application form by post to Dr. C.M. Singh, Department of Community and Family Medicine, First Floor, College Building, AIIMS Patna, Pin Code- 801507, before/on 18th Dec., 2018

Note: The list of eligible candidates will be uploaded on website: aiimspatna.org. Please keep visit this site from 20th Dec. 2018 till interview date. Tentative date of interview is 24th Dec., 2018. Final date and other details of interview will be available with list of screened candidate.

THE APPOINTMENT IS COTERMINUS WITH THE PROJECT

C.M. Singh

Department of Community and Family Medicine
First Floor, College Building, AIIMS Patna-801507

Affix recent
Passport size
Photograph
Duly signed

Name of the post applied for : Data Collector

1. Name in Full: Mr/Miss/Mrs _____
(IN CAPITAL LETTERS)

2. Father's Name _____

3. Address: (i) Present _____

_____ Pin Code

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|--|--|--|--|--|--|

(ii) Permanent : _____

_____ Pin Code

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(iii) Contact Telephone No. _____ & Mobile No. _____

(iv) E-mail address : _____

4. Date of Birth : ____ / ____ / ____

Sex : Male Female

Nationality : _____

5. Are you a member of Scheduled Caste/Scheduled Tribe/OBC

(Answer : Yes or No): _____

If the answer is Yes, Provide Caste Certificate

6. Particulars of all examinations passed and degree obtained (commencing with the Matriculation or equivalent examinations). Attach attested copies of all certificates.

| Examination or Degree obtained | Subject taken | Year of Passing | Grade/ Percentage |
|--------------------------------|---------------|-----------------|-------------------|
| | | | |
| | | | |
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7. Give particulars of Employments held in chronological order:-

| Name of employer | Date of joining | Date of leaving | Designation during employment | Salary (excluding allowances) last drawn & scale of pay |
|------------------|-----------------|-----------------|-------------------------------|---|
| | | | | |
| | | | | |
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8. Details of Enclosures:

i.

ii.

iii.

iv.

DECLARATION

I hereby declare that the entries in this form and the additional particulars, if any, furnished herewith are true to the best of my knowledge and belief.

Place:

Signature of Candidate

Date :