



भाकृअनुप - केन्द्रीय खारा जलजीव पालन अनुसंधान संस्थान

ICAR - CENTRAL INSTITUTE OF BRACKISHWATER AQUACULTURE

ISO 9001:2008 CERTIFIED www.ciba.res.in

(Indian Council of Agricultural Research, Govt. of India) 75, Santhome High Road, Raja Annamalai Puram, Chennai - 600028, Tamil Nadu, India



Applications are invited from eligible candidates for recruitment of ONE **Senior Research Fellow** purely on temporary basis under **NABARD** funded project of this institute.

Post	Senior Research Fellow – 1
Project Name	“Coastal watershed-based surface and subsurface salinity mapping and modelling of Thiruvallur and Kanchipuram districts, Tamilnadu for sustainable brackishwater aquaculture”
Duration	1 YEAR /co-terminus with the project
Essential qualification	SRF/YP : M.E/M.Tech in Water Resources Engineering/Remote sensing/Agri or Geoinformatics or Information Technology M.F.Sc/M.Sc (Bio-Chemistry / Aquaculture / Marine biology / Zoology / Life sciences /environmental science or equivalent) with NET qualified
Desirable	Knowledge in shrimp farming / aquaculture
Emoluments	SRF/YP : Rs.25000/- + 30% HRA per month
Age Limit	Maximum 30 years for men and 35 years for women as on date of interview. Age limits are relaxable for SC / ST / OBC candidates as per rules.
Last Date for submission of biodata	16th October 2020
Date of interview	22nd October 2020
Mode of interview	Online

The Candidates fulfilling the above criteria may send their application in attached proforma through e-mail to rekha@ciba.res.in or nila_71@yahoo.com on or before **16.10.2020**. Time of the interview and communication will be sent to the short-listed candidates only. Interview will be conducted on **22.10.2020**. Director, CIBA reserves right to accept or reject any applications.

Principal Investigator

1.	Application for the post	
2.	Name (in Block Letters)	
3.	Date of Birth	
4.	Mother Tongue	
5.	Sex: M/F	
6.	Marital Status	
7.	Nationality	
8.	Category: SC/ST/OBC	
9.	Father/Husband Name	
10.	Address for Correspondence	
11.	Phone No.	
12.	E-mail Address	

13. Qualification:

Examination	Name of Institution	Year of Passing	% of marks/ GPA obtained	Remarks

14.	i) Working Experience(if any) ii) Whether currently employed:	
15.	Name and address of referee along with phone number and e-mail address.	

I hereby declare that I have carefully read and understood the instructions and particulars on this application and that all entries in this form as well as in the attached sheets are true to the best of my knowledge and belief.

Signature

Date:
Place: