टेलीफोन/ Tel: (0674) 2300060 (निदेशक/ Director)

EPABX: 230010/ 2300016/ 2300481

ई मेल/ E-mail: director.liwm@icar.gov.in वेब/Web: www.iiwm.res.in



## भाकृअनुप - भारतीय जल प्रबंधन संस्थान

ICAR-Indian Institute of Water Management (भारतीय कृषि अनुसंधान परिषद/ Indian Council of Agricultural Research)

रेल विहार के सामने, चंद्रशेखरपुर, भ्वनेश्वर-751023, ओडिशा

Opp. Rail Vihar, Chandrashekharpur, Bhubaneswar-751023, Odisha

F.No.: 85/Estt/01(TS)/401(4)

Date: 22/02/2022

To

The Directors/Project Directors/Zonal Coordinators of all the ICAR Institutes/PDs/ Research Centres.

Sub:

Filling up the vacant post of Technical Assistant (T-3), Category-II, functional group "Library/ Documentation/Information Science" under Inter-Institutional Transfer Basis at ICAR-Indian Institute of Water Management, Bhubaneswar -reg.

Madam/Sir,

It is proposed to fill up the vacant post of Technical Assistant (T-3), Category-II and functional group "Library/Documentation/Information Science" under Inter-Institutional Transfer basis at ICAR-Indian Institute of Water Management, Bhubaneswar. The particulars of the post & eligibility are as under:

Sl.No.	Name of the Post	No. of	Pay	Eligibility	Place of Posting
		vacancy	Level		
1.	Technical Assistant	One	Level-5	Officials appointed on DR	Bhubaneswar
	(T-3), Category-II,	(UR)		in T-3. Also, officials	
	functional group			appointed on DR in T-3	
	"Library/			but subsequently promoted	
	Documentation/			to higher grades on 5	
	Information Science"			yearly assessment basis	
				will also be considered	
				against T-3 vacancy	

The above Inter-Institutional transfer will be regulated as per Council's instruction vide TS-19(1)/2002-Estt.IV dated 19.03.2020, amendment issued vide Council's letter No. TS-19(6)/2020-Estt.IV dated 19.03.2021 & other Rules & Guidelines issued by ICAR from time to time.

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The candidates must possess essential qualification as per TSR & be initially appointed in Category-II in the respective functional group. They may send their applications through proper channel in the enclosed proforma (Annexure-I) to The Director, ICAR-Indian Institute of Water Management, Chandrasekharpur, Bhubaneswar-751023.

It is requested that the above vacancy may be circulated widely and the applications of the desirous candidates having requisite eligibility and who can be relieved immediately on the event of their selection may be forwarded.

Following documents/papers may also please be sent along with the application form:

- 1. Attested copies of the APAR dossiers for the last five years i.e. from 2016-2017 to 2020-2021.
- 2. Vigilance Clearance & Integrity Certificate.
- 3. A statement of major/minor penalty, if any, imposed on the applicant during the last five years.

The last date of receipt of application is <u>15.03.2022</u>. Applications received after the last date & incomplete are not likely to be considered. However, the Selection Committee/Director, ICAR-IIWM, Bhubaneswar will reserve the right to accept/reject the applications without any reason thereof.

Yours faithfully,

Encl: As above.

22/02/2022, Administrative Officer (I/c)

Copy for information and necessary action to:

- 1. The Under Secretary (NRM), ICAR, Krishi Bhawan, New Delhi
- 2. The Under Secretary (TS), ICAR, Krishi Bhawan, New Delhi
- 3. In-Charge, AKMU, ICAR-IIWM, Bhubaneswar for uploading the same in the Institute's website.
- 4. The PS to the Director, ICAR-IIWM, Bhubaneswar

## **APPLICATION PROFORMA**

. 1	Name of the Car	ididate (in capital) & FMS N	0. :		
2.	Father's/Husban	d's Name	:		
3.	Name of the Inst working at prese	titute where the candidate is	:		
4.	Date of Birth &	Age (as on date of circulation	n) :		
5.	Gender (M/F)		:		
6.	Postal Address		:		
7.	Mobile No.		:		
8.	Email ID		:		
9.	Date of initial ap Recruitment	ppointment on Direct	:		
10.	Functional Grou	р	:		
11.	Present Basic Pa	y with Level of Pay	:		
12.	Whether belongs	s to SC/ST/OBC/Ex-SM/PH	÷		
13.	Category(UR/OI initial appointment	BC/SC/ST/PH) on which ent was made	:		
14.	Educational Qua	dification:			
_	Exam passed	Board/University	Year of Passing	Subjects	Percentage of marks
			West		
				to de prima en en en	

15. Reason for Transfer (Please specify – Max 100 words and attach necessary documents, if any)

a. Spouse ground (whether employed in	
ICAR/ State Govt./Central Govt./	
Autonomous Body/ PSUs, Certificate as per	
ICAR letter No. F.No. TS-19(01)/2002-	
Estt.IV dated 19.3.2020 may be enclosed)	
b. Medical ground (self or any family members: family as defined under CGHS/CS(MA) Rules (Certificate as per ICAR letter No. F.No. TS-19(01)/2002-Estt.IV dated 19.3.2020 may be enclosed)	
c. Length of service in difficult areas (Certificate as per ICAR letter No. F.No. TS-19(01)/2002-Estt.IV dated 19.3.2020 may be enclosed)	
d. Other, if any (Give details)	

16. Details of Technical/Other Qualifications (if any)

Name of the Institute	Post Held	Scale of Pay	Period	Nature of Duties Performed
			WANTED TO THE TOTAL THE TOTAL TO THE TOTAL TOTAL TO THE T	

## **Declaration**

I		hereby decl	are that all the statement
made above are complete and cinformation found false or incorredecision of the Director, ICAR-II	ect at any time, action m		
Date:			
		Sig	gnature of the Candidate

## Certificates to be furnished by the Head of Office

- 1. Certified that the information furnished above are verified from the service records of the candidate and found correct and further certified that no disciplinary action has been taken, initiated or being contemplated against the employee.
- 2. Vigilance Clearance Certificate
- 3. CRs/APARs of last five years (Attested Photocopies)

Signature with Seal of the Head of Office