

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.

Notificaton No 19/2022

Walk in test for the Selection of Trainees in Quality Evaluation Laboratory of Spices Board QEL at Mumbai.

[Exclusively for Scheduled Caste(SC)/ Scheduled Tribe(ST) candidates]

| | |
|------------------------------------|---|
| No. of Trainees | : Trainee Analyst(Chemistry) – 03 Trainee Analyst(Microbiology)- Expected vacancy 01 A panel will be prepared for selection of trainees for future vacancies. |
| Educational Qualification | : <u>Trainee analyst (Chemistry)</u> : Bachelors degree in Chemistry from a recognised University/ Institute. <u>Trainee analyst(Microbiology)</u> : Bachelors degree in Microbiology from a recognised University/ Institute. |
| Eligibility | : 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(Chemistry) :Rs.20000/-per month. Trainee Analyst(Microbiology):Rs.20000/-per month. |
| Leave Eligibility | : One day per month. |
| Date, Time & Place of walk-in-test | : 13.10.2022, time:11.30am to 12.30 pm. Regional Office, Spices Board, EL-184, TTC Industrial Area, Mahape, Navi Mumbai -400 710 (Ph No. 91-7208497206). |

| | |
|------------------------------------|--|
| Instructions to candidates: | <p>Eligible candidate appearing for the test should fill-in and sign the form placed as Annexure I of this notice and bring along with all necessary documents given below:</p> <ul style="list-style-type: none">o passport size color photograph,o original certificates for:<ul style="list-style-type: none">▪ Identity proof (Voter card, Aadhaar card etc.).▪ proof of age.▪ proof of education and training.▪ Caste Certificate.o One set of attested photocopies of the above document stapled to the filled-in and signed Annexure 1.o The number of trainees indicated is provisional and may vary at the time of selection. |
|------------------------------------|--|

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

Dated: 27th September 2022
Kochi-25

Director(Admn)i/c
Spices Board

Hindi version follows

* * * * *

The details to be filled with subject as “Application for”

| | | | | |
|-----|--|------------------------|-----------------------|-----------------|
| 1. | Name: | | | |
| 2. | Father/Guardian Name: | | | |
| 3. | Sex: | | | |
| 4. | Date of Birth: | | | |
| 5. | Marital status: | | | |
| 6. | Religion: | | | |
| 7. | Category(SC/ST): | | | |
| 8. | Nationality: | | | |
| 9. | ID proof: | | | |
| 10. | Phone no.: Alternate no.: | | | |
| 11. | Email id: | | | |
| 12. | Address for communication: | | | |
| 13. | Permanent Address: | | | |
| 14. | Educational Qualification(Copies may be enclosed as attachment): | | | |
| | Exam | Specialisation/Subject | University/ Institute | Year of passing |
| | | | | Percentage/ GPA |
| | | | | |
| 15. | Details of experience(if any)(copies may be enclosed as attachment): | | | |
| 16. | Any other relevant information: | | | |

Declaration

I hereby declare that the information furnished above are true, complete and correct to the best of my knowledge and belief. I am in possession of the documents in proof of the claim made in this application.

Date:

(Signature)

Place:

(Name)