

### Institute of Liver & Biliary Sciences

Applications are invited for the following posts on contractual basis under the project titled “**Strengthening the National Liver Disease Biobank by the Establishment of an Add-on Covid-19 Biobank**”. Duration of the project is two years.

The candidates who fulfil the mentioned qualifications/ eligibility criteria may fill up the prescribed application form given below and send all their photocopies of degree/ certificate/ diploma/ testimonials along with their application latest by 27.01.2021 on email ID [biobank.ilbs@gmail.com](mailto:biobank.ilbs@gmail.com)

Job Location: Institute of Liver & Biliary Sciences (ILBS), D-1, Vasant Kunj, New Delhi-110070

S. No.	Title of the Post	Consolidated Remuneration per month	Eligibility Criteria/Qualification and Experience	Age Limit
1	<b>Junior Resident</b> No. of Post – 1(UR)	Rs. 75,000/-	<b>Essentials:</b> MBBS from recognized university with internship certificate and registered with Delhi Medical Council  <b>Desirable:</b> Minimum one year experience clinical/ teaching/ research and/ pathology or laboratory medicine	40 Years
2	<b>Lab Technician</b> No. of Post – 3(UR)	Rs. 30,000/-	<b>Essentials:</b> 10+2 with 2 years Diploma in Medical Laboratory Technology from a recognized Institute with a minimum working experience of 4 years Or B.Sc. in Medical Technology /B.Sc. (MLT) from a recognized university with minimum experience of 2 Years.  <b>Desirable:</b> Experience of working in molecular and/or biobanking/ cryobanking laboratory.	35 Years
3	<b>Office Executive</b> No. of Post – 1(UR)	Rs. 25,000/-	<b>Essentials:</b> Graduate with minimum working experience of 2 years post qualification with knowledge of computer and accounts.  <b>Desirable:</b> Experience of working in healthcare industry /hospital/pharma of repute.	35 Years

**Notes:**

1. The appointment under the project shall be on “contract basis” initially for a period of one year, further extendable for maximum one year on the basis of individual performance.
2. The effective date for reckoning the requisite qualification, experience and the upper age limit will be 27.01.2021.
3. Only shortlisted candidates will be called for written test/interview/skill test in the Institute.
4. The shortlisted candidates may also have to appear for the written test/Interview/Skill test.
5. No TA/DA will be provided.
6. In case of any query the candidate may call biobank department on the telephone no 011-463-000-00 Ext: 24813

**Project: "Strengthening the National Liver Disease Biobank by the establishment of an Add-on COVID-19 Biobank"**  
(DBT funded)

**Application for the post of \_\_\_\_\_**

Paste your recent  
passport size  
photograph

1. Name in block letters : Dr./Mr./Ms./Mrs. \_\_\_\_\_  
First Middle Last

2. Gender :  (Write 'M' for Male; 'F' for Female)

3. Marital Status : Married / Unmarried / Widow / Divorcee

4. (a) Permanent address : \_\_\_\_\_  
\_\_\_\_\_

City/District: \_\_\_\_\_ State: \_\_\_\_\_

Pin: \_\_\_\_\_ Phone/Mob.: \_\_\_\_\_

(b) Postal address : \_\_\_\_\_

(For correspondence) \_\_\_\_\_

City/District: \_\_\_\_\_ State: \_\_\_\_\_

Pin: \_\_\_\_\_ Phone/Mob.: \_\_\_\_\_

Email: \_\_\_\_\_

5. Date of birth : \_\_\_\_\_

(Please annex documentary evidence)

6. Are you

(a) A citizen of India by birth and or by domicile: Yes ( ) No ( )

(b) Person of Indian origin : Yes ( ) No ( )

(c) Holding dual citizenship : Yes ( ) No ( )

7. Do you belong to any of the following categories :

(Please annex documentary evidence)

(i) UR / SC / ST / OBC / Ex Service men : \_\_\_\_\_

(ii) PWD (having 40% or more disability) suffering from: \_\_\_\_\_

8. Father's/ Husband's name : \_\_\_\_\_

First Middle Last

D-1, Vasant Kunj, New Delhi – 110070

Phone No.: 46300000 Ext. – 24813 & 24814; Email: [biobank.ilbs@gmail.com](mailto:biobank.ilbs@gmail.com) ; Website:

<https://www.ilbs.in>, & <https://www.nldb.in>

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(By DBT funded)

9. Educational Qualifications (matriculation onwards) (if required, attach extra sheet):

S. No.	Month & Year		Name of Degree /Diploma/Certificate	Name of Institution and Location	Name of University
	From	To			

10. Work Experience (Start from most recent appointment/job) (if require, attach extra sheet):

S. No.	Organization Name	Date of Joining	Date of Leaving	Position Held	Nature of Job (Temporary/ Permanent /contractual)	Scale of Pay/ Total Emoluments

11. References (Name, designation, address and telephone/mobile number):

- i. \_\_\_\_\_  
\_\_\_\_\_
- ii. \_\_\_\_\_  
\_\_\_\_\_

**Declaration**

I hereby declare that all statements made in this application are true and complete to the best of my knowledge and belief. In the event of any information being found false or incorrect or ineligibility being detected before or after the test, interview, and joining, my candidature will stand cancelled and all my claims of the recruitment will stand forfeited.

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