

King Georg's Medical University, Lucknow-226003 Department of Dermatology Venereology & Leprosy.

Ref. No. 52/Sun/2023

Dated 24 .03 . 2023

ADVERTISEMENT NOTICE

Applications are invited for one (01) post of Junior Research Assistant in the Council of Science & Technology, UP (UP-CST) funded research project entitled "*TLR-6,8 gene polymorphism and gene expression in leprosy patients from North Indian population*" under Dr.Swastika Suvirya, (Principal Investigator), Department of Dermatology, Venereology & Leprosy, KGMU, Lucknow, U.P.

Interested person with requisite qualifications and experience may submit their duly filled application along with CV and all the attested documents via mail on email id: <u>swastika.p@gmail.com</u> before 4:00 PM, 07thApril, 2023. The candidate should also bring 2 attested hard copies of all the document, certificates and testimonial along with 2 passport size photographs at the time of interview. The interview will be held on 10thApril, 2023 at 3:00 PM in Room number -103, PRO building, KGMU, Lucknow, UP. No call letters for interview will be sent separately. TA/DA will not be admissible for appearing in the interview.

Name of the Project &	& Name of the post, Number, Emoluments and Qualifications				
Funding Agency					
<i>"TLR-6, 8 gene</i>	Junior Research Assistant -01				
polymorphism and gene	Salary: Rs. 20,000/-				
expression in leprosy	Essential Qualification:				
patients from North Indian	Post Graduate degree in Life sciences subjects/ Biotechnology/ Microbiology/				
population"	Biochemistry/Immunology/ Molecular Biology with first division at				
Council of Science &	and the state of the land				
Technology, UP (UP-CST)					
	Desirable Qualification: Candidates having prior research experience in molecular biology, immunological assays, microbiology and basic statistics will be given				
	preference. These posts are entirely temporary.				
	Project duration – is 3 years/ initial appointment will be given for one year and				
	could be renewed on yearly basis subject to his/her performance.				
	Maximum age shall be 28 years as of 1st April of the year in which the				
	application is made. He/ She should be a resident of Uttar Pradesh (UP).				

The above positions are purely temporary and will be filled in on contractual basis for one year which may be extended upon satisfactory performance upto a maximum of 3 years. The selected candidate shall have no right/claim for regular appointment at this Institute, as the engagement is co-terminus with the project.

Copy forwarded to:

- 1. Faculty In-Charge, Research Cell, KGMU, Lucknow.
- 2. Registrar, KGMU, Lucknow.Principal Investigator
- 3. Faculty In-Charge, Website, KGMU, Lucknow.

Dr. SwastikaSuvirya Dr SWASTIKAS

Additional Professor & Head

FORMAT FOR APPLICATIONFORM

Advt. No.:]	Dated:		
"TL	archProjectEntitled- R-6, 8 gene polymorphism and gene expre llation"	ession in lepros	y patients from	n North Indian		
Fund	ing Agency: Council of Science & Technology,	Lucknow UP				
Name	of P.I.: Dr. Swastika Suvirya					
Name of position: Junior Research Assistant(JRA)				Recent		
1.	Name of the Candidate (InCapital):	•••		passportsize coloredphoto graph		
2.	Sex (Male/Female):			•		
3.	MaritalStatus(Married/Unmarried):					
4.	DateofBirth:					
5.	Age(ason27-03-2023):	Years	Months	Days		
6.	Name of Father/Spouse:					
7.	Present/ContactAddress:					

- 8. PermanentAddress:
- 9. MobileNo:
- 10. E-mail:
- 11. Nationality:
- 12. Category Gen/SC/ST/OBC/PH:

Dr SWASTIKA SUVIRYA

13. EducationalQualification(10thonward):

Qualification	Subject/Discipline	Board/College/ Institute/Univ.	Year of passing	CGPA/ % of marks	Division
10 th					
12 th					
B. Sc/B. Tech					
M. Sc /M. Tech					
AnyOther					

14. Anyotherinformation: Enclose aseparatesheet

DECLARATION

I hereby declare that all the statements made in this application are true and complete and nothing has been concealed/ distorted. I am aware that, if at any time I am found to have concealed/distorted any material information, my engagement is liable to be summarily terminated without notice.

Place: Date: Signature of the Applicant

Enclosures:(Attachself-attestedcopyofdocuments)

- 1. ProofofDate ofBirth
- 2. ProofofUPDomicile
- 3. Marksheets&certificatesof alltheexaminationpassed
- 4. UpdatedResume

(M.D.)

Additional Professor & Head Department of Dermatology