

# G. B. Pant National Institute of Himalayan Environment

Himachal Regional Centre, Mohal, Kullu - 175 126, Himachal Pradesh

Applications from Indian Nationals are invited for purely project based temporary position of **Junior Project Fellow (JPF)** under NMHS funded project at Himachal Regional Center of the Institute. Candidate having appropriate qualifications in relevant subject/specialization with consistently good academic records and experience may send their complete application in the prescribed format (Annexure-I) with all supporting documents to the undersigned by e-mail (<a href="headhrc@gmail.com">headhrc@gmail.com</a>, <a href="headhrc@gmail.com">rksingh@gbpihed.nic.in</a>) on or before **15**<sup>th</sup> **October**, **2020**. The shortlisted candidates will be informed separately about the date of interview. The interview will be held through virtual mode (Audio/Video).

| Sr. | Position &   | Essential Qualification  | Desirable  | Nature of duties / Project  |  |
|-----|--|--|--|---|--|
| No. | Emoluments   |  |  |   |  |
| 1.  | Junior Project Fellow (JPF) (01)  @ Rs. 16,000 per month + HRA @ 8% or minimum Rs. 1800 for 1 <sup>st</sup> & 2 <sup>nd</sup> year and @ Rs. 18,000 per month + HRA @ 8% for 3 <sup>rd</sup> year. | First class Master Degree in Science including Earth Sciences / Hydrology / Remote Sensing & GIS / Environmental Science / Chemistry or equivalent | Preference will be given to the candidates having experience in the climate change, Remote Sensing & GIS, relevant field, etc. | Events in the Beas basin, and Designing a Proto-type Advance Warning System |  |

**Age Limit:** Junior Project Fellow (JPF) - 28 years. Relaxation for SC/ST/Women/PH and OBC candidates as per Govt. of India norms.

Selected candidate will work in Modelling of extreme weather events in 3 institutes (GBP-NIHE, HRC, DDMA, Kullu & CSIR 4PI, Bangalore) as and when required by mutual discussion.

**Centre Head** 

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### **Instructions to fill in Application Form**

#### General

- (a) Please download the attached Form, complete it, and return.
- (b) No Column of application form should be left blank.
- (c) Use additional sheets where necessary, with relevant columns drawn thereon, inserting proper references.
- (d) Completed application should be accompanied by all the requisite documents. You are requested to go through the "check list" of documents before submitting the application. **Incomplete applications are liable to be rejected**.
- (e) Photocopies of documents asked for need self-attestation.
- Item No. 1. Name given here should be the same as given in your matriculation/higher secondary certificate and degree certificates. If there is a change, addition or deletion, an affidavit from a Notary Public/Magistrate is necessary.
- Item No. 9. In case grades are awarded, please attach the sheet giving conversion of grades to percentage of marks.
- Item No. 11 (Annexure I). Specializations may be indicated in terms of (a) Subject (b) Broad Area(s) of specialization and (c) Exact area(s) of specialization.

#### Check list of documents must be attached

| 1. | Photograph on the main application form  | Yes/No |
|----|--|--------|
| 2. | Affidavit if you carry different name/surnames in your certificates                          | Yes/No |
| 3. | Attested copy of School Leaving/High School/Secondary School Certificate (For date of birth) | Yes/No |
| 4. | Attested copies of Mark Sheets/Grade Cards & Degrees for BSc/MSc/MPhil/PhD/ BE/ME/PhD, etc.  | Yes/No |
| 5. | List of Publications, if applicable  | Yes/No |
| 6. | Copies of all experience certificates (self attested)  | Yes/No |



## G. B. Pant 'National Institute of Himalayan Environment' (NIHE)

## Himachal Regional Centre, Mohal, Kullu – 175126, Himachal Pradesh

## **APPLICATION FORM**

| Please use BLOCK LETTERS |                              |             |  |
|--------------------------|------------------------------|-------------|--|
| Position Applied For:    |                              |             |  |
| Project Title:           |                              | Photograp h |  |
|                          |                              |             |  |
| 1. Full Name             | Sex (M/F):                   |             |  |
| 2. Father's/Husband's Na | ameNationality:              |             |  |
| 3. Present Address       |                              |             |  |
|                          |                              |             |  |
|                          |                              |             |  |
| 4. Permanent Address:    |                              |             |  |
|                          |                              |             |  |
|                          |                              |             |  |
|                          |                              |             |  |
| 5. Email id:             |                              |             |  |
| Γelephone/Mobile         |                              |             |  |
| _                        | (b) Birth Place :            |             |  |
|                          |                              |             |  |
|                          | )20(c) State of Domicile     |             |  |
| 7. Citizenship:          |                              | •••••       |  |
| 8. Do you belong to:     | (a) Scheduled Caste - Yes/No |             |  |
|                          | (b) Scheduled Tribe - Yes/No |             |  |
|                          | (c) OBC - Yes/ No            |             |  |
|                          | (d) General - Yes/ No        |             |  |

# 9a. Academic and Professional qualifications (from 10th onwards): Attach self-attested certificates

| Qualification              | Subject       | Percentage<br>of Marks<br>or Grade | Name of Univ./Institution | Duration<br>of<br>Course | Month &<br>Year of<br>Passing |
|----------------------------|---------------|------------------------------------|---------------------------|--------------------------|-------------------------------|
|                            |               |                                    |                           |                          |                               |
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|                            |               |                                    |                           |                          |                               |
|                            |               |                                    |                           |                          |                               |
| 9. (b) If PhD deg          | ree not award | ed, please give v                  | whichever applicable:     |                          |                               |
|                            |               |                                    |                           |                          |                               |
| Likely date of submission: |               |                                    |                           |                          |                               |
| 10. Title of PhD           |               |                                    |                           |                          |                               |

11. Specializations, in terms of Broad Area of Specialization and Exact Area of Specialization:

| (a) Subject | (b) Broad Area of<br>Specialization | Exact Area of Specialization |
|-------------|-------------------------------------|------------------------------|
|             |                                     |                              |
|             |                                     |                              |

| 12. Publications and Patents: (Please attach list of publications in SCI journals with full reference and corresponding with those in the list) |   |   |   |            |                         |
|---|---|---|---|------------|-------------------------|
| (a) No. of Papers (i) Published(ii) Accepted  |   |   |   |            |                         |
| (b) No. of Books  | published                               |   |   |            | ······                  |
| (c) No. of patents  | : (i) Filed:                            |   | (ii)                                    | Granted:   |                         |
| 13. Prizes, Honou   | ırs, Awards, Distind                    | ctions, if an                           | y:                                      |            |                         |
|   |   |   |   |            |                         |
|   |   |   |   |            |                         |
| 14. Experience he   | eld:                                    |   |   |            |                         |
| Position  | Name of the                             | Dates                                   |   | Pay/ Wages | <b>Nature of Duties</b> |
|   | Organization/<br>Agency                 | From                                    | То                                      |            |                         |
|   |   |   |   |            |                         |
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|   |   | 1                                       |   |            |                         |
| 15. Please give th  | e names, designation                    | ons and add                             | resses of re                            | ferees:    |                         |
| (i)   | •••••                                   |   |   |            |                         |
| •••••   | • | • | • |            |                         |
|   |   | • |   |            |                         |
| (ii)  |   | • |   | •••••      |                         |
|   |   |   |   |            | •••••                   |
| (iii)   |   |   |   |            |                         |
|   |   |   |   |            |                         |
|   |   |   |   |            |                         |

| 16. Employment details, if any:  |
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| 17. Whether NET Qualified – Yes/No (if yes, please give details)   |
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| 18. Any other information for suitability of the post  |
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| 19. Declaration I have read the terms and conditions of the project/Institute. I accept and agree to abide |
| by these if the fellowship/post is offered to me. I certify that to the best of my                         |
| knowledge and belief the particulars given in the application are correct. I understand                    |
| that the decision taken on my application by GBPNIHE will be final. If false and                           |
| suppression of factual information in the application form comes to the notice of                          |
| GBPNIHE at any time during the tenure of the fellowship/project, the appointment                           |
| would be liable to be terminated.  |
|  |
|  |
| Place Signature of the Candidate   |
| Date Name:   |