



# नवोन्मेषी एवं अनुप्रयुक्त जैव - प्रसंस्करण केंद्र (सी०आई० ऐ० बी०)

(जैव प्रौद्योगिकी विभाग के तहत एक राष्ट्रीय संस्थान)

विज्ञान एवं प्रौद्योगिकी मंत्रालय (भारत सरकार)

## CENTER OF INNOVATIVE AND APPLIED BIOPROCESSING

(A National Institute under Dept. of Biotechnology,  
Ministry of Science & Technology, Govt. of India)

2nd Floor, C-127, Phase VIII, Industrial Area, S.A.S. Nagar, Mohali-160071 (Pb.)

वेबसाइट/Website: [www.ciab.res.in](http://www.ciab.res.in)

फ़ोन /Tel: 0172-4990232, फ़ैक्स/Fax: 0172-4990204

### **FORM OF APPLICATION FOR RECRUITMENT OF SCIENTIFIC STAFF/FACULTY**

**ADVERTISEMENT No: CIAB/18/2015-Rectt.**

**(ROLLING ADVERTISEMENT TILL JUNE, 2016)**

To be filled in by the candidate	For Office use	
Advt. No.	Application S. No:	Affix your self- attested recent coloured size passport photograph
Post applied for		
Post Code/Sr. No. if any	Date of receipt:	

1.	Name in full <b>(IN BLOCK LETTERS)</b>	
2.	Please Tick:	Male <input type="checkbox"/> Female <input type="checkbox"/> Married <input type="checkbox"/> Unmarried: <input type="checkbox"/>
3.	Father's/ Husband's Name	
4.	Mother's Name	
5.	Date of Birth:	
6.	Place of Birth	
7.	<ul style="list-style-type: none"><li>Age (for applicants upto as on January 07, 2016)</li><li>Age (as on June 07, 2016 for applicants after January 07, 2016)</li></ul>	Years <input type="checkbox"/> Months <input type="checkbox"/> Days <input type="checkbox"/> Years <input type="checkbox"/> Months <input type="checkbox"/> Days <input type="checkbox"/>
8.	<ul style="list-style-type: none"><li>Duration of Post-Doctoral R&amp;D Experience (as on January 07, 2016)*</li><li>Duration of Post-Doctoral R&amp;D Experience Age (as on June 07, 2016)*</li></ul> <p>*Give details under 23 in this form</p>	Years <input type="checkbox"/> Months <input type="checkbox"/> Days <input type="checkbox"/> Years <input type="checkbox"/> Months <input type="checkbox"/> Days <input type="checkbox"/>

9.	Postal Address	<hr/> <hr/> <hr/> <hr/> Pin: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
10.	Phone No. (with STD code)	
11.	Mobile No	
12.	E-mail	
13.	Permanent Home Address	<hr/> <hr/> <hr/> <hr/> Pin: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
14.	Are you a citizen of India by birth or by domicile?	

15. State 'Yes' if you are Physically Handicapped or are a member of Scheduled Caste/Scheduled Tribe/ Other Backward Class: **(If Yes, Attach an attested copy of the prescribed certificate)**

Physically Handicapped	Scheduled Caste	Scheduled Tribe	Other Backward Class

16. Are you related to any employee(s) of the Department of Biotechnology or Center of Innovative & Applied Bioprocessing (CIAB)? If Yes, Give Details:

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17. Educational/ Professional Qualifications

**(a) (Class 10<sup>th</sup> Onwards to Master's Degree(s):**

<u>Exam. Passed</u>	<u>% age of marks or CGPA</u>	<u>Year of Passing</u>	<u>Duration of the Degree, etc.</u>	<u>Board/Univ.</u>	<u>Subject(s)</u>

18. Title of Master's Dissertation(s), if any

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**19. Details about Ph.D. Thesis and Degree, if applicable**

(i) Exact subject in which registered for Ph.D. or Thesis submitted for or Degree Obtained

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(ii) Date (DD/MM/YYYY) of Registration/Enrolment for Ph.D. Degree

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(iii) Date (DD/MM/YYYY) of Submission of Ph.D. Thesis or Award of Degree

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(iv) Full Title of Ph.D. Thesis

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(v) If as per advertisement for the position for which this application is being submitted, it is required to reflect subject/topic of specialization of your Ph.D. dissertation. Please indicate your specialization below and provide a (half to one) page summary of your Ph.D. research work in testimony of the same (as a SEPARATE ANNEXURE).

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20. Area(s)/Domain(s) of substantial and functional core competence as Post-Doctoral Work Profile, if any

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21. Professional Qualification (e.g. Professional Trainings, Courses, Workshops etc.)

<u>Exam. Passed</u>	<u>Division/ Grade &amp; % age of marks, if applicable</u>	<u>Year of Training</u>	<u>Duration of the training/courses etc.</u>	<u>Institute / Organisation</u>	<u>Subject/Topic</u>



23. Detailed Profile & Duration of Post-Doctoral R&D Experience

R&D Organization/Academic Institution	Date From	Date Upto	Total Duration (Years, Months, Days)	R&D Work/Project

24. Sponsored, Collaborative and/or Inter-Institutional Network Projects or Programs of Research worked in as member and/or leader (give title of project, your role therein and Duration)

(i) \_\_\_\_\_

(ii) \_\_\_\_\_

(iii) \_\_\_\_\_

25. Relevant Professional Honours, Awards, Accreditations/recognitions etc.

(i) \_\_\_\_\_

(ii) \_\_\_\_\_

(iii) \_\_\_\_\_

26. Inter-Disciplinary/Cross-disciplinary R&D work or interface of R&D work, if any, (Please give only bulleted summary)

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

27. Are you also willing to be considered for a position at pay-band and/or Grade Pay lower than the one you have applied for herein? \_\_\_\_\_ (Please write YES or NO).

28. Time (in Months) required for joining, if selected: \_\_\_\_\_

29. Additional information, if any, which you would like to mention in support of your suitability for the post:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

30. Do you dispassionately feel that you deserve to be considered by the screening-cum-shortlisting committee for relaxation of age and/or duration of R&D experience in view of your relevant extra-ordinary or special/outstanding achievements/outputs/contributions/scholarly standing etc., if so, please state them parametrically below in bulleted form (not more than 5 bullets).

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

*(Each parametric point of exceptionality indicated for consideration must be supported by testimonial documents)*





## Endorsement by the Head of the Department or Office

*(Candidate already in employment should get the following endorsement signed by his/her present employer)*

No. \_\_\_\_\_

Date \_\_\_\_\_

Forwarded application of Dr./ Shri / Ms. \_\_\_\_\_ (Name & Designation).

It is certified that:

1. The information furnished by Dr./ Shri / Ms \_\_\_\_\_ has been verified from official records and found correct.
2. It is also certified that no disciplinary/ departmental enquiry is either pending or contemplated against \_\_\_\_\_ and that he/she is not undergoing any penalty.
3. His/ Her integrity is certified.

Signature.....

Designation.....

Official Stamp:

**STME 1. Title of Ph.D. Thesis:**  
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.....  
.....  
.....

**STME 2. Title of Masters Dissertation (if applicable)**  
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**STME 3. Number of Publications in SCI Impact Journals** (Give full details as *Annexure 1*)

**STME 3.1. No. of SCI Impact Publications of last 5 Years** (Give full details as *Annexure 2*):

**STME 3.2. Three best and relevant publications (with full details)**

- 1.
- 2.
- 3.

**STME 3.3. No. of publications in non-SCI journals** (Give full details as *Annexure 3*):

**STME 4. Numbers of Patents:**  
**(Granted + Applications at Patent Offices + Submitted to your IPR Cell/Office)**  
(Give full details as *Annexure 4*)

**STME 4.1. No. of Patents Licensed for Use** (Give full details as *Annexure 5*):

**STME 4.2. No. of Patents in Practice/Translation/Usage/Advancement**  
(Give full details as *Annexure 6*)

**STME 4.3. No. of Patents around the best single core invention/process/product:**  
(Give full details as *Annexure 7*):

**STME 5. No. of Technologies/processes of developed for potential use:**  
(Give full details as *Annexure 8*):

**STME 5.1. No. of processes/technologies developed during last 5 years:**  
(Give full details as *Annexure 9*)

**STME 5.2. No. of Technologies/processes translated for end usage:**  
(Give full details as *Annexure 9*)

**STME 5.3. Specify your 3 best Technologies/Processes/Translational leads:**

1.

2.

3.

**STME 6. Which area of agri-produce bioprocessing interests you most & why? (max 200 words)**  
*(Attach a separate annexure as Annexure-10)*

**STME 7. State your 3 strengths?**

1.

2.

3.

**STME 8. Given the opportunity, which aspect of innovation and technology translation/up-scaling would you like to get your competence developed/improved.**

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**STME 9. Write an essay on your vision of agri-produce bioprocessing for significant techno-economic impact in India. You may have a region-specific thought too (max 500 words, attach a separate annexure as Annexure-11)**

**STME 10. Assuming that you work in an institute like CIAB and have the option to choose the path of career progression based on your performance, what would you count on most for your assessment i.e. prioritise (1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup>, 4<sup>th</sup>) your intended target of output from the work at CIAB.**

	Please give ranks
Publications	
Patents	
Technologies Translated	
Products Delivered	

**STME 11. Please list your three most significant successes/accomplishments you are happy about or proud of:**

## SELF DESCRIPTION OF QUALIFICATIONS REQUIRED vs. POSSESSED

**(To be submitted along with the completed Application Form)**

1. Name: \_\_\_\_\_

2. (i) Date of Birth & Age (as on January 07, 2016 for first review): \_\_\_\_\_

(ii) Date of Birth & Age (as on January 07, 2016 for subsequent review): \_\_\_\_\_

3. Advt. No. CIAB/18/2015-Rectt.

4. Position: \_\_\_\_\_

<b><u>Parameter</u></b>	<b><u>Required as per Advertisement</u></b>	<b><u>Possessed by you with comments, if any</u></b>
<b>Age</b>		
<b>Educational Qualification</b>		
<b>Other Academic credentials, like R&amp;D/Technical leadership</b>		
<b>Research/Industrial Experience, if applicable &amp; Other Experience (duration &amp; Nature)</b>		
<b>Professional Skills/Competences Match</b>		
<b>Output/Outcome/Achievements of work</b>		
<b>Other Technical/ Translational/ Scientific credentials, if applicable</b>		

\_\_\_\_\_  
Signature of applicant



**SYNOPSIS SHEET** [*to be submitted as hard copy with application form and soft copy by e-mail to* [ceo@ciab.res.in](mailto:ceo@ciab.res.in) and/or [ao@ciab.res.in](mailto:ao@ciab.res.in)]

ADVERTISEMENT NO.	CIAB/18/2015-Rectt.									
NAME OF THE POST										
NAME, DOB & Category (Gen/OBC/SC/ST/PH)	Qualifications (from 10 <sup>th</sup> onwards)				Experience (in chronological order)					
	Examination passed, year of passing and duration of degree etc.	%age of marks or CGPA	Name of Board/ University	Subjects/ Specialisation	Organization Name	Position Held	Duration	Pay Scale	Total Period	Additional Qualifications