

कीटनाशक सूत्रीकरण प्रौद्योगिकी संस्थान
Institute of Pesticide Formulation Technology
(An Autonomous Institution of Govt. of India)
Department of Chemicals & Petrochemicals
Ministry of Chemicals & Fertilizers
Sector-20, UdyogVihar, NH-8
Gurugram – 122 016 (Haryana)

Advt. No. : IPFT/PROJ-RECTT/SEPTEMBER/2023

WALK-IN-INTERVIEW

Eligible and interested Indian Nationals may attend the **Walk-In-Interview** on **19th September, 2023 at 11:00 AM onwards** for selection on the position/s which intend to be filled-up purely on Ad-hoc/Contract, time bound, non-regular, temporary and co-terminus basis under Externally funded and In-house projects of the Institute as per the details given below :

| Sr. No. | Post | No. of Post/s | Qualification & Experience | Consolidated Remuneration (₹ Per Month) | Age Limit (Maximum) |
|----------------|------------------------------------|----------------------|---|--|----------------------------|
| 1. | Consultant (Finance & Accounts) | 01 | Passed in the Final Examination of ICWAI / CA with 3 years of experience in Finance / Accounts with knowledge of Govt. Rules and Regulation in Central / State Govt. / PSUs / Universities / Research Institute of Repute / Laboratories / Reputed Private Companies. OR SAS qualification with 5 years of experience in Finance / Accounts with knowledge of Govt. Rules and Regulation in Central / State Govt. / PSUs / Universities / Research Institute of Repute / Laboratories / Reputed Private Companies. OR Degree from a recognized university with 7 years of experience in Finance / Accounts with knowledge of Govt. Rules and Regulation in Central / State Govt. / PSUs / Universities / Research Institute of Repute / Laboratories / Reputed Private Companies. Desirable : Working knowledge of PFMS, Preparation of Annual Accounts, Compliance of various statutory requirement under GFR-2017 shall be considered as added qualification. | i) Rs. 80,000/- ii) Maximum age limit 35 years* as on date of Walk-In-Interview candidates other than retired from CPSUs, ABs and Central Government. iii) Maximum age limit 63 years as on date of Walk-In-Interview for candidates retired from CPSUs, ABs and Central Government. iv) The remuneration in respect of retired employees receiving the pension from the Central/State Govt. shall be equal to their last pay drawn minus pension amount. | |

* The upper age limit is relaxable for candidates belonging to Scheduled Castes (SC) / Scheduled Tribes (ST)/Physically Handicapped (PH), Woman & OBC as per norms of the Government.

General Instructions :-

1. The above positions are purely temporary in nature and on Ad-hoc/Contract basis with co-terminus on completion of the projects/requirements and non-transferable to any other projects.
2. The above positions are initially for a period of **six months** extendable further based on continuation of project(s)/requirements subject to satisfactory performance of individual or till regular arrangement made against the posts, whichever is earlier.
3. The date for determining age/qualification and experience shall be the date of interview. The eligible candidates may appear before the selection committee for

interview on the date and time mentioned above. Candidates must bring with them a duly filled application form given below, with original & attested copies of mark sheets/certificates etc. along with a recent passport size photograph.

4. Any amendment/modification in the context of the advertisement would be uploaded in our website of IPFT (www.ipft.gov.in).
5. The Institute reserves the right to fill or reject all or any specific posts as notified in the advertisement.
6. The numbers of vacancies are indicative and may be increased or decreased. The number of post/s advertised are provisional and can be varied as per the requirement of the Institute.
7. It may be noted that offer of contractual hiring/appointment against the advertised post/s will not confer any right on the selected candidates for absorption in IPFT or claiming any status whatever.
8. Canvassing in any form will be a disqualification.
9. No TA/DA shall be payable for attending the interview.

Note : Depending upon the number of candidates, the interview may be continued for the subsequent days also.

**DIRECTOR
IPFT, GURUGRAM**

APPLICATION FORM

APPLICATION FORM FOR POST

Affix your
recent self
attested
passport size
photograph

1. Advertisement No. : _____
2. Position Code Applied for : _____
3. Name (in Block Letters) : _____
4. Father's Name : _____
5. Date of Birth (DD/MM/YYYY) : ____ / ____ / ____
6. Age as on date of Interview : ____ Years ____ Months ____ Days
7. Gender (Male/Female) : _____
8. Nationality : _____
9. (i) Postal Address : _____
(ii) Permanent Address : _____
(iii) Email-ID & Mobile No. : _____
10. Whether NET qualified (UGC/CSIR/ARS) (give details) : _____
11. Category (SC/ST/OBC/GEN) : _____
12. Details of Qualification : _____

| <i>Exam Passed</i> | <i>Board/University</i> | <i>Year of Passing</i> | <i>Subjects</i> | <i>Marks%</i> | <i>Division</i> |
|--------------------|-------------------------|------------------------|-----------------|---------------|-----------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

13. Experience, if any : _____

| <i>Name of the Employer</i> | <i>Designation</i> | <i>Period</i> <i>From - To</i> | <i>Pay drawn</i> | <i>Nature of duties</i> |
|-----------------------------|--------------------|-----------------------------------|------------------|-------------------------|
| | | | | |
| | | | | |
| | | | | |

14. Any other information : _____

Undertaking / Declaration

I hereby declare that all the statements made in the application are correct and complete; and nothing has been concealed to the best of my knowledge and belief. In the event of any information being found false or incorrect at any time, action may be taken against me and I shall abide by the decision.

Signature of the Candidate with Date

List of Enclosures :



Institute of Pesticide Formulation Technology (IPFT)
Sector-20, Udyog Vihar, Gurugram – 122 016 (Haryana)

Appl. No.

APPLICATION FORM FOR CONSULTANT (RETD. FROM GOVT. SERVICE)

Advt. No. _____ **dated** _____

Affix a recent passport size photograph duly attested by the candidate

1. Name in Full (In Block letters) : _____
2. Father's / Husband's Name : _____
3. Nationality : _____
4. Sex : _____
5. Date of Birth : _____
6. Age (As on the date of interview) : _____
7. Date of Retirement, if applicable : _____
8. Office where last worked, if applicable : _____
9. Last Pay Drawn, if applicable : _____
10. Present Address : _____

- Tel. No. : _____
- Mobile : _____
- E-mail : _____
11. Permanent Address : _____

12. Educational & Technical Qualification : _____
(Add separate sheet, if required)

| <i>Exam Passed</i> | <i>Name of the University</i> | <i>Years of Passing</i> | <i>Subjects</i> | <i>Division</i> | <i>Percentage of Marks</i> |
|--------------------|-------------------------------|-------------------------|-----------------|-----------------|----------------------------|
| | | | | | |

10. Experience Details : _____
(Add separate sheet, if required)

| <i>Ministry / Department / Office / Organization</i> | <i>Name of Post</i> | <i>Pay Scale / Salary</i> | <i>Period</i> | | <i>Nature of Duties</i> |
|--|---------------------|---------------------------|---------------|-----------|-------------------------|
| | | | <i>From</i> | <i>To</i> | |
| | | | | | |

11. References of two superior officers under whom the applicant has worked :

| <i>Particulars</i> | <i>Reference 1</i> | <i>Reference 2</i> |
|-----------------------|--------------------|--------------------|
| Name | | |
| Designation | | |
| Ministry / Department | | |
| E-mail ID | | |
| Contact Number | | |

DECLARATION

I solemnly declare that all the statements made in the application are true, complete and correct to the best of my knowledge and belief. I understand and agree that in the event of any information being found false OR incorrect/incomplete OR ineligibility being detected at any time before OR after selection/interview, my candidature is liable to be rejected and I shall be bound by the decision of the Director-IPFT.

Signature
Full Name of the Applicant

Place :
Dated :