



Government of West Bengal  
Office of the Director  
Institute of Post Graduate Medical Education & Research  
244 A. J C Bose Road, Kolkata -700 020  
Email: director.ipgmer@gmail.com, Phone: 2204-1101, Fax: 2223-5181

INST/Memo no. 3542

Dated: 19/06/23

**Notice for 'PROJECT ASSISTANT' recruitment**

Applications are invited for a **walk-in interview** for the post of a **'PROJECT ASSISTANT'** for a **'Department of Science & Technology and Biotechnology, West Bengal'** funded project (Regn. No. : 384(Sanc.)/STBT-11012(19)/28/2019-ST SEC) entitled **"ROLE OF INTERSTITIAL CELLS OF CAJAL IN CHRONIC CONSTIPATION IN CHILDREN"** from July 2023 to June 2024 (one year).

**Eligibility for Project Assistant:**

- Essential Qualification: 10+2 in science stream with Masters/Bachelor/Diploma/Certificate course in Medical Laboratory Technology or allied sciences.
- Candidates with experience in Histopathology desirable.

**Age limit:** Age limit up to 35 years (relaxable for deserving candidates for 5 years)


**Remuneration:** Rs. 6300/- per month (Consolidated)

**Tenure:** One year

**Procedure of Application:** Eligible Candidates should appear personally before the Selection Committee on **21<sup>st</sup> June, 2023 at the Faculty Room of Prof Uttara Chatterjee, Dept. of Pathology, 2<sup>nd</sup> floor, Emergency Building, , IPGMER, Kolkata at 12 noon**, along with the following documents.

**Documents Required:**

1. Filled in Application Form (given below)
2. Original ID Proof
3. Original Mark sheet and Certificates
4. A set of self-attested photocopies of all relevant documents must be tagged to the Application Form.

  
19/06/23

Prof. Manimoy Bandyopadhyay  
Director,  
IPGMER, Kolkata

**APPLICATION FORM FOR WALK-IN INTERVIEW**

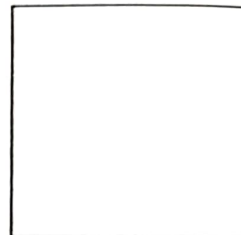
for the Project titled

**"ROLE OF INTERSTITIAL CELLS OF CAJAL IN CHRONIC CONSTIPATION IN CHILDREN"**

**Department of Science & technology and Biotechnology, West Bengal**

**(Regn. No. : Ref: Memo no. 179(Sanc.)/STBT-11012(19)/28/2019-ST SEC)**

Post Applied for: **PROJECT ASSISTANT**



Name: .....

Father's Name: .....

Address for Communication: .....

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Mobile No: ..... Email ID: .....

Permanent Address: .....

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Date of Birth: ..... Age in Years ..... Gender: .....

ID Proof Document: ..... Number .....

Marks in Qualifying Exam: Marks Secured ..... Max. Marks ..... Percentage .....

Previous Experience (if any): .....

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***Declaration: I do hereby declare that the information given is true to the best of my knowledge and belief. If at any point of time, any above information is found to be false, my appointment will be cancelled.***

Place: ..... Date: .....

Full Signature: .....