# ICAR-CENTRAL INSTITUTE FOR RESEARCH ON BUFFALOES SIRSA ROAD, HISAR (HARYANA)

#### WALK-IN-INTERVIEW

Walk-in-interview for Young Professional-I (Two) with consolidated package of Rs. 25,000/- per month purely on temporary and bilateral contract basis will be held on 11.05.2022 at 10.30 a.m. at ICAR-CIRB, Hisar. For Essential Qualification, Application Form and other details visit our website <a href="https://www.cirb.icar.gov.in">www.cirb.icar.gov.in</a>

Asstt. Administrative Officer

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#### ICAR-CENTRAL INSTITUTE FOR RESEARCH ON BUFFALOES SIRSA ROAD, HISAR (HARYANA) Phone No. 01662-281608, 281602 Fax 01662-275004

Website: www.cirb.icar.gov.in

## WALK-IN-INTERVIEW FOR YOUNG PROFESSIONAL-I ON BILATERAL CONTRACT

Sr. No.	Name of Divisions/Sections	Requirement for YP-I	Qualification				
1.	Animal Farm Section	YP-I – (Two)	Essential:- Veterinary and Livestock Development Diploma (VLDD) or equivalent from VCI recognized college.  Desirable:- Having working experience of atleast one year in artificial insemination in large animals, treatment and management of sick animals, vaccination, and maintenance of records.				
Not u	as on 11.05.2022 nder 21 years and not ove T/Women candidtes).	er 45 years (upper	age relaxable by 5 years in case of				
Cons	olidated emoluments Pa	wahla ta					
Youn	g Professional - I	tyable to:					
Perio	d of Contract :		Rs. 25,000/- per month				
One y	ear, extendable to maxim	um of another to					
perfor	mance of candidate How	Wer contract	n based on needs of the Institute and				
assign	ning any reason with a not	ice of 30 days	n based on needs of the Institute and n be terminated premature by either side without				
Date (	of Walk-in-interview						
11.05.	2022 at 10.30 am at ICAE	R-Central Institute	6- D				
	31 10/1	· Ochila msillute	for Research on Buffaloes, Sirsa Road, Hisar				

Asstt. Administrative officer

### ICAR-Central Institute for Research on Buffaloes, Sirsa Road, Hisar Application for the Position of Young Professional-I at CIRB, Hisar on Bilateral Contract

Affix Passport Size Photo

1.	Name of Cano							-			
2.	(in block letter Father's Name	s) e									
3.	Date of Birth			-				Sex	М	F	
4.	Age as on 11.05.2022						Vationality	(√)		Ė	
5.	Address for Correspondence						vaconunty			-	
6.	Mobile No. email (if any)										
7.	Educational qua	ith matriculation	n (attach	photoc	conies of cor	tificat	1				
	Name of exam		Year of passing	University/ Board	Sub	ject	% age Marks	of Divis			
							Iviains		Grade	<u>}</u>	
								+		_	
8.	Name of the Training Course (attach photocopies of certificates)			Duration			Institution				
9.	Experience (attach photocopies of certificates in support of experience)  Name of Period Period Period										
	i ellou			Designation/ Emolum		ente	nce) Nature of				
-	Organization From To		Position	Lillolan	Emoluments I			Reason for Leaving			
							26				

I solemnly declare that the statements made by me in this form are correct to the best of my knowledge and belief.

Date: Place:

Signature of candidate