SPICES BOARD

Notification No:1/2023

WALK IN TEST FOR THE SELECTION OF TRAINEE ANALYST IN CHEMISTRY FOR QUALITY EVALUATION LABORATORY OF SPICES BOARD, KOLKATA.

[Exclusively for Scheduled Caste (SC) and Scheduled Tribe(ST) candidates]

Trainee Analyst (Chemistry)	One (01) No.
Category	SC/ST.
Stipend	Rs.20,000/- per month.
Training Location	QEL,Kolkata.
Method of selection	Walk-in-test.
Age	Not more than 30 years as on the date of walk-in- test.
Tenure of Training	One year from the date of joining (extendable upto one
	more year).
Leave eligibility	One day per month.
Qualification	Essential:-
	Bachelor of Science Degree with Chemistry as one of the
	subject or Bachelor degree in Chemistry from a recognized
	university or equivalent .
	Subject of training : Training on chemical analysis of
	Spices and Spice products

Venue, Date and time of Walk-in-test	Venue: SPICES BOARD REGIONAL OFFICE & QUALITY EVALUATION LABORATORY,, Baruipur,Amtala Road,Bamungachi,Baruipur,Kolkata-700145, Ph.No:-033-24230012/9443801838
	Date: 07/07/2023 Time: 11.30 AM

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Instructions to candidates:	Eligible candidate appearing for the test should fill-in and sign the form placed as Annexure I of this notice and bring along with all necessary documents given below:			
	o passport size color photograph,			
	o original certificates for:			
	 Identity proof (Voter card, Aadhaar card etc.) 			
	• proof of age			
	proof of education and training			
	■ Caste Certificate			
	O One set of attested photocopies of the			
	above document stapled to the filled-in and			
	signed Annexure 1.			
	The number of trainees indicated is provisional and			
	may vary at the time of selection.			

Director(Admn.)i/c

Date: 12th June, 2023

Kochi-25.

The	details	to be fille	d with s	subject as	"Application	for	 ,,
	or course	to oc mire	u		PP		

1.	Name	:			
2.	Fathe	er/Guardian Name:			
3.	Sex:				
4.	Date	of Birth:			
5.	Marit	al status:			
6.	Religi	on:			
7.	Categ	gory(SC/ST):			
8.	Natio	nality:			
9.	ID pr	oof:			
10.	Phon	e no.:			
	Alteri	nate no.:			
11.	Emai	l id:			
12.	12. Address for communication:				
13.	Perm	anent Address:			
14	Educ	ational Qualification(Copies may	he enclosed as attach	ment):	
14.	Educ				
Ex	xam	Subject	University/ Institute	Year of passing	Percentage/ GPA
15.	15. Details of experience(if any)(copies				
	may be enclosed as attachment):				
16.	Any c	ther relevant information:			
	1				

Declaration

I hereby declare tha	at the info	ormation furn	ished abo	ve are true, o	complete a	nd cori	rect to	the bes	t of	my
knowledge and bel	ief. I ar	n in possess	ion of the	documents	in proof	of the	claim	made	in t	his
application.										

Date:	(Signature)
Place:	(Name)