SPICES BOARD

WALK IN TEST FOR SELECTION OF SAMPLE RECEIPT DESK TRAINEE (SRD) IN SPICES BOARD, REGIONAL OFFICE, UNJHA,GUJARAT

Notification No.35/2023 [Exclusively for Scheduled Caste(SC)/ Scheduled Tribe(ST) candidates]

Trainee	02(Two) nos.		
	(A panel will be prepared for selection of trainees for future		
	vacancies.)		
Category	SC/ST.		
Stipend	Rs.20,000/- per month.		
Training Location	Regional Office, Unjha, Gujarat		
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	eligibility One day per month.		
Qualification	Graduation/Degree in any discipline from a recognized		
	University/Institute or equivalent with computer knowledge.		
	Candidates who have completed training in any of the offices/		
	Quality Evaluation Laboratories of the Board are not eligible		
	to apply again.		

Venue, Date and time of Walk-in-test	Venue: 3RD FLOOR,323/S9 COMPLEX UNJHA SYDHPUR HIGHWAY,UNJHA MEHSANA,GUJARAT 384170 Ph: 02767 250142
	Date: 07.03.2024 Time: 10.00 AM

Instructions to candidates:	Eligible candidate appearing for the test should fill-in and sign the form placed as Annexure I I of this notice and bring the same along with the following:-		
	o passport size color photograph, o original certificates for:		
	The number of trainees indicated is provisional and may vary at the time of selection.		

Date: 28th February, 2024 Director(Admn.)i/c

Kochi-25.

The details to be filled with subject as "Application for Selection of Sample Receipt Desk (SRD) Trainee

1.	Name				
		r/Guardian Name:			
	Sex:	•	Male	Female	Transgende
4.	Date	of Birth:			
5.		al status:			
6.	Religi				
7.	Category(SC/ST):				
8.	Natio	nality:			
9.	. ID proof:				
	Phone				
	Aiterr Emai	nate no.:			
12.	Addre	ess for communication:			
13.	Perm	anent Address:			
14.	14. Educational Qualification(Copies may be enclosed as attachment):				
Ex	am	Subject	University/ Institute	Year of passing	Percentage/ GPA
15.	Detai	ls of experience(if any)(copies			
	may be enclosed as attachment):				
16.	Any o	ther relevant information:			
			Declaration		

I hereby declare that the information furnished above are true, complete and correct to the best of my knowledge and belief. I am in possession of the documents in proof of the claim made in this application.

Date:	(Signature)
Place:	(Name)