## SPICES BOARD

(Ministry of Commerce & Industry, Govt. of India) "Sugandha Bhavan" N.H.By Pass, Palarivattom.P.O, Cochin – 682025, Kerala, India (Phone: 91-484-2333610 – 616) www.indianspices.com

## WALK IN TEST FOR SELECTION OF TRAINEES IN QUALITY EVALUATION LABORATORY (QEL) OF SPICES BOARD, CHENNAI.

## **Notification No.44/2023** [ Exclusively for Scheduled Caste(SC)/ Scheduled Tribe(ST) candidates ]

Trainees	Trainee Analyst(Chemistry) – 03(Three) Nos;				
	Trainee Analyst(Microbiology)-02(Two) Nos.				
	SRD Trainee -01(One) No.				
	(A panel will be prepared for selection of trainees for future				
	requirements.)				
Category	SC/ST.				
Stipend	Rs.20,000/- per month.				
Training Location	QEL, Chennai				
Method of selection	Walk-in-test.				
Age	Not exceeding 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	Trainee analyst (Chemistry) :				
	Essential:-Bachelor of Science Degree with Chemistry as one of the				
	main subject or Bachelor degree in Chemistry , from a recognized				
	university/ Institute, or equivalent .				
	Trainee analyst (Microbiology) :				
	Essential: Bachelors Degree in Microbiology, from a recognized				
	University/Institute, or equivalent .				
	SRD Trainee :				
	Essential: Bachelors degree in any discipline from a recognized				
	University/ Institute with computer knowledge.				
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	Candidates who have completed training in any of the Quality Evaluation				
	Laboratories of the Board are not eligible to apply.				
Subject of training :	Trainee analyst (Chemistry) : Training on chemical analysis of Spices				
	and Spice products.				
	Trainee analyst (Microbiology) : Training on microbiological analysis				
	of Spices and Spice products.				

Venue, Date and time	Venue: SPICES BOARD, PLOT No. R-11, SIPCOT INDUSTRIAL				
of Walk-in-test	COMPLEX,GUMIDIPOONDI,				
	THIRUVALLUR, TAMIL NADU 601201				
	Ph: 044 – 27923450,Mob: 8921561130				

Trainee analyst (Microbiology)
Date: 26.09.2024 Time: 10.30-11.30 AM
<u>SRD trainees</u> Date:-26.09.2024 Time: 11.30-12.30 PM
Trainee analyst (Chemistry) Date:26.09.2024 Time: 2.30-3.30 PM

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,				
	<ul> <li>o original certificates for:         <ul> <li>Identity proof (Voter card, etc.)</li> <li>proof of age</li> <li>proof of education and training</li> <li>Caste Certificate</li> </ul> </li> <li>o One set of attested photocopies of the above document stapled to the filled-in and signed Annexure 1.</li> </ul>				
	The number of trainees indicated is provisional and may vary at the time of selection.				
	The selection as Trainee Analyst in Spices Board is only a training and under no circumstances are linked to regular appointments and cannot be regularized at any stage.				

Date: 09th September, 2024

Director(Admn.)i/c

Kochi-25.

Annexure – I

The details to be filled with subject as "Application for Selection of .....

1.	Name:								
2.	Father	/Guardian Name:							
3.	Gender: Male Female Transgender								
4.	Date of Birth:(DD/MM/YY)								
5.	Marita	l status:							
6.	Religio	n:							
7.	Catego	ory(SC/ST):							
8.	Nationality:								
9.	ID proof:								
10.	Phone	no.:							
	Altern	ate no.:							
11.	. Email id:								
12.	2. Address for communication:								
13.	3. Permanent Address:								
101									
14.	Educa	tional Qualification(Copies may be e	nclosed	l as a	ttachment	):			
Ex	am	Subject	Unive	ersity	/ Institute		Year of passing	Percentage/ GPA	
15.	Details	s of experience(if any)(copies may be						1	
	enclos	ed as attachment):							
16.	Any ot	her 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)