



भाकृअनुप-राष्ट्रीय पशुरोग जानपदिक एवं सूचना विज्ञान संस्थान
ICAR-National Institute of Veterinary Epidemiology and Disease Informatics
ಐಸಿಎಆರ್ -ರಾಷ್ಟ್ರೀಯ ಪಶುರೋಗ ಸೋಂಕುಶಾಸ್ತ್ರ ಮತ್ತು ಮಾಹಿತಿ ವಿಜ್ಞಾನ ಸಂಸ್ಥೆ
ರಾಮಗೌಡನಹಳ್ಳಿ, ಯೆಲಹಂಕಾ, ಬೆಂಗಲೂರು - ೫೬೦೦೬೪

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F.No12-29/Rectt/AAO/NIVEDI/2021/214-218

Date: 16/06/2021

CORRIGENDUM

In continuation to this Office Circular No.12-29/Rectt/AAO/NIVEDI/2021/156-159 dated: 05/06/2021 issued by this office to fill up one post of Assistant Administrative Officer at ICAR-NIVEDI, Bengaluru, the terms and conditions are modified as follows:

Sl.No.	Earlier contents	Modified contents
1.	Filling up of one post of AAO on deputation /permanent absorption/ transfer basis at ICAR-NIVEDI, Bengaluru.	Filling up one post of AAO on deputation/transfer basis at ICAR-NIVEDI, Bengaluru
2.	The deputation will be initially for a period of one year and after evaluation of the performance, the deputation may be extended or may be absorbed permanently based on satisfactory performance of the incumbent.	The deputation will be initially for a period of one year and after evaluation of the performance, the deputation may be extended as per rules

- Those who have already submitted application for the said post will be considered as per the modified contents of the circular dt.15-6-2021.
- Other terms & conditions remains unchanged

ADMINISTRATIVE OFFICER

For distribution to:

1. Headquarters/Directors of ICAR Institutes/Project Directors/NRCs/Directors of ATARI/Head of Stations of ICAR Institutes.
2. The Director (Admn.) ICAR, Krishi Bhavan, New Delhi-110 001
3. The Dy. Secretary (AS), ICAR, Krishi Bhavan, New Delhi-110 001
4. The Officer In-Charge, Computer Section, ICAR-NIVEDI with a request to upload in NIVEDI website.
5. PA to Director, ICAR-NIVEDI, Bengaluru for information of the Director'

PROFORMA

**Application for the post of Assistant Administrative Officer on deputation / transfer basis
at ICAR-NIVEDI, Bengaluru, Karnataka.**

1.	Name of the Candidate (In Block Letters)	
2.	Name of the Institute where Working at present	
3.	Date of appointment on regular basis in the present post	
4.	Whether permanent /temporary	
5.	Date of Birth	
6.	Educational qualification	
7.	Whether belongs to SC/ST/OBC/General	

8. Service Details:

Name of the Institute	Post held	Scale of pay	Period		Nature of duties performed
			From	To	

9. Any other information /Particulars relevant to the service of the employee's :

DECLARATION

I do hereby declare and certify that the information furnished by me is correct and true to the best of my knowledge and belief.

Signature of the candidate with date

CERTIFICATE TO BE FURNISHED BY THE HEAD OF OFFICE

Certified that the information furnished by the candidate has been verified from the service records of the applicant and found correct.

Signature of the Head of Office