ICMR JRF Entrance Examination 2020

INDIAN COUNCIL OF MEDICAL RESEARCH
V. RAMALINGASWAMI BHAWAN,
ANSARI NAGAR, POST BOX 4911, NEW DELHI-110029

Organizing Institute:
POSTGRADUATE INSTITUTE OF MEDICAL EDUCATION & RESEARCH
CHANDIGARH-160012

Fee for General/EWS/OBC : Rs. 1500/- +Transaction charges as applicable.
Fee for SC/ST : Rs. 1200/- +Transaction charges as applicable.
Fee for PwBD : Exempted from payment of fee

Date for filling of online application form : 16.05.2020
Last date for filling of online application : 16.06.2020
(Not to be extended in any case)
Date of Entrance Examination : 12.07.2020

Mode of Exam : COMPUTER BASED TEST (CBT)/ONLINE

All candidates are directed to deposit the above fee through online payment gateway available at ICMR-JRF 2020 application portal w.e.f. 16.05.2020 to 16.06.2020

MODE OF PAYMENT: THROUGH DEBIT/CREDIT CARD/NET BANKING

All applicants are advised to read the information brochure and instructions carefully before starting online registration and ensure that no column is left blank. In the event of rejection of the application form, no correspondence/request for reconsideration will be entertained. Applicants are also advised to download and take a print of the Application form. They should retain a copy of Application form till the award of fellowship.

Please visit www.pgimer.edu.in & http://icmr.nic.in regularly for latest notification/announcement as well as any Addendum/Corrigendum/Latest updates etc. regarding the Entrance Exam.
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1. **PERSONS TO BE CONTACTED**

1. **Dr. N. C. Jain** : Scientist ‘G’ & Head, Division of Human Resource Planning & Development (HRD), Indian Council of Medical Research (ICMR), V. Ramalingaswami Bhawan, Ansari Nagar, New Delhi-110029
   
   Phone 011-26589258(D), 26588980 Ext. 308
   Email: drencejain@gmail.com

2. **Sh. Mahesh Chand** : Administrative Officer (HRD) Division of Human Resource Planning & Development (HRD), Indian Council of Medical Research (ICMR), V. Ramalingaswami Bhawan, Ansari Nagar, New Delhi-110029
   
   Phone: 011-26589319 (D), Ext. 349
   Email: maheshchand205@gmail.com

3. **Prof. Nalini Gupta** : Professor in-Charge (Examination Cell) Postgraduate Institute of Medical Education & Research (PGIMER), Sector-12 Chandigarh-160012
   
   Phone: 0172-2755566
   Fax: 0172-2744401, 2745078
   Email: naliningupta203@gmail.com

4. **Sh. Manoj Kumar** : Registrar Postgraduate Institute of Medical Education & Research, Sector-12 Chandigarh-160012
   
   Phone: 0172-2755567
   Fax: 0172-2744401, 2745078
   Email: icmrexampgichd@gmail.com

5. **Sh. Rajneesh Anand** : Sr. Administrative Officer (Academic) Postgraduate Institute of Medical & Education Research, Sector-12 Chandigarh-160012
   
   Phone: 0172-2755560
   Fax: 0172-2744401, 2745078
   Email: icmrexampgichd@gmail.com

   FOR GENERAL ENQUIRY : 0172-2755561
   FOR TECHNICAL QUERY : 022-61306260
   E.MAIL : icmrexampgichd@gmail.com
2. INTRODUCTION

The Indian Council of Medical Research (ICMR), New Delhi an apex body in India for the formulation, coordination and promotion of biomedical research under Department of Health Research (DHR), Ministry of Health and Family Welfare (MoH&FW), is one of the oldest medical research organizations in the world which has completed more than 100 years of its existence. The Governing Council of the ICMR is presided over by the Hon’ble Union Minister of Health & Family Welfare.

The ICMR conducts biomedical research through its (i) 26 permanent mission-oriented institutes (Intramural Research) located in different parts of India, which address themselves to research on specific health topics like tuberculosis, leprosy, cholera, diarrhoeal diseases, viral diseases including AIDS, malaria, kala-azar, vector control, nutrition, food & drug toxicology, reproduction, immuno-haematology, oncology, medical statistics, etc. including (ii) Six Regional Medical Research Centres (RMRC) addressing themselves to regional health problems, as well as aim to strengthen or generate research capabilities in different geographic areas of the country.

Extramural research is promoted through grants-in-aid given as a project mode to scientists from non-ICMR institutes by (i) setting up Centres for Advanced Research in different research areas in selected departments of Medical Colleges, Universities and other non-ICMR Research Institutes; (ii) Task force projects which emphasize on a time-bound, goal-oriented approach with clearly defined targets, specific time frames, standardized and uniform protocols and often a multi-centric structure and (iii) open-ended research on the basis of applications for grants-in-aid received from scientists from non-ICMR Research Institutes located in different parts of the country.

Strengthening of research capabilities and a definite research strategy are recognized as a vital tools for successful research operations and the ICMR has strive to adopt new strategies from time to time. Human resource development in biomedical research is encouraged through various schemes such as (i) Research Fellowships (i.e. Research Junior & Senior Fellowships and Research Associateship); (ii) Short-term Visiting Fellowships which allow scientists to learn advanced research techniques from other well-established research Institutes in India; (iii) Short Term Studentship (STS) (for undergraduate pursuing medical/dental students to encourage them to familiarize themselves with research methodologies and techniques); (iv) Financial assistance to MD/MS/DM/M.Ch/MDS thesis in priority areas of Biomedical Research, (100 slots/year) Financial assistance of Rs. 50,000/- is provided to candidates who are in the 2nd year of MD/MS course; (v) MD-Ph.D. Programme 25 slots/year: To identify young medical graduates with brilliant academic records for pursuing postgraduate qualifications; (vi) Post Doctoral Fellowship Programme (50/year): To identify and support young Ph.D. for the conduct of research using ICMR Institutes working for priority areas of Health Research and (vii) ICMR “Nurturing Clinical Scientists (NCS) Scheme is being instituted to foster high quality research opportunities. Fresh MBBS/BDS candidates within two years of completing their degree are eligible to apply (Interns/MD/MS/MDS are NOT eligible) in the cutting edge areas Fundamental Basic/Clinical Research in communicable and non communicable diseases, and reproductive health including nutrition etc. at MCI/DCI recognized medical colleges/ICMR network of Institutes/Centers. (viii) Various Training Programmes and Workshops conducted by various Institutes including ICMR Institutes and Headquarters.

Two broad lines of research endeavour are discernible in the ICMR in the last two decades (i) Application of available knowledge, under the prevailing socio-economic and cultural environment through Health Systems Research involving interdisciplinary efforts between biomedical, social and behavioural sciences with epidemiology acting as a bridge; (ii) Application of the powerful tool of modern biology to search for the causes and also to unravel basic mechanisms and to identify risk factors leading to early diagnosis and development of new therapeutic agents including vaccines.
3. INTRODUCTION TO ICMR JRF

The ICMR Junior Research Fellowship (JRF) Examination is the first step in the process of admission to the Ph.D. Research Programme. Exam for ICMR JRF fellowship conducted at the 12 Centres viz., Bengaluru, Bhopal, Bhubaneswar, Chandigarh, Chennai, Delhi (NCR), Kolkata, Mumbai, Guwahati, Hyderabad, Srinagar (J&K) and Varanasi once a year on 2nd/3rd Sunday in July. The award of JRF is made on merit basis by holding an entrance examination after issuing a country-wide admission notice. The admission notice is published in leading English Newspapers of India usually during March/April.

ICMR in collaboration with PGIMER, Chandigarh will hold a National level examination on Sunday, July, 12 2020 for determining the eligibility of Indian National candidates for the award of JRF through ICMR. The award of JRF to the successful eligible candidates will depend on their finding placement in a medical college/hospital/university/national laboratory/institution of higher learning and research as applicable. Fellowship will be initiated from the date of Ph.D. enrolment (should be within one year from the date of issue of JRF award letter) and it will be treated as date of joining, total duration being five years or submission of Ph.D. thesis (whichever is earlier).

(I) A total of 150 Fellowships would be awarded. (120 fellowships would be awarded for work in the field of biomedical sciences with emphasis on Life Sciences (like microbiology, physiology, molecular biology, genetics, human biology, biotechnology, biochemistry, bioinformatics, biophysics, immunology, pharmacology, nursing, zoology, botany, environmental sciences and veterinary medicine (excluding Agriculture extension/Soil Sciences, etc). Thirty (30) fellowships would be awarded for work with emphasis on Social Sciences like psychology, sociology, home science, statistics, anthropology, social work, public health/health economics (Agriculture Economics will not be considered).

(I-i) Two separate merit lists, one comprising the candidates qualifying for life sciences and the second for those candidates qualifying for social sciences, will be made on the basis of their performance in the above exam.

(I-ii) The candidates selected for the JRF programme of ICMR would be permitted to enrol themselves for the Ph.D. programme in subjects of biomedical/health research of any University/Medical college recognized by the UGC/MCI.

(II) Another 100 candidates would be selected for consideration for positions of JRF under various research schemes of ICMR (subject to fulfilling the conditions for appointment under the schemes) for the duration of that scheme. These JRFs would also be permitted to complete Ph.D. while working in the scheme, if enrolled. The validity of result will be two years for placement in ICMR funded projects.

(III) SC/ST/OBC/PwBD (Persons with Bench-mark Disabilities) and Economically Weaker Sections (EWS) applicants in General category will be given special consideration/reservation as per Govt. policy guidelines.

(IV) The successful candidates would be notified by post and e-mail during the first week of September, 2020. The list would also be available on ICMR website: http://icmr.nic.in.
4.1 Procedure for applying

Before filling online applications, candidates are advised to go through the guidelines given at website http://pgimer.edu.in or icmr.nic.in. **Incomplete applications will not be considered and no correspondence will be entertained.**

4.2 Educational Qualification:

**M.Sc./M.A. or equivalent degree** with minimum 55% marks for General/EWS/OBC candidates and 50% for the SC/ST and PwBD candidates in the subjects mentioned under the head method of selection.

A candidate who is appearing/has appeared in the final year (IV/VI Semester whichever is applicable, and final year where Semester system is not there) of M.Sc./M.A. or equivalent examination during the session (2019-2020) can also apply for the exam as RA (Result Awaited). **Such candidates will have to submit the attestation format (given in annexure-I duly certified by the Head of the Department/Institute over his/her signature and rubber stamp (with address and name) where he/she is appearing in the final year examination.**

However, such candidates shall be admitted to the Exam provisionally and shall be considered eligible for JRF only after they submit the proof of having passed the Master's Degree examination with **requisite percentage.** The M.Sc./M.A. or equivalent degree mark sheet must be submitted to ICMR, latest by **30th September, 2020** otherwise candidature will automatically be forfeited.

4.3 Age Limit

The age limit for admission to the eligibility test is 28 years as on **30-09-2020** (upper age limit relaxable up to five years in case of candidates belonging to SC/ST, PwBD and female candidates, three years in the case of OBC category.

4.4 Syllabus:

- As prescribed by UGC.
- A sample question paper for ICMR JRF Examination is available on ICMR website

4.5 Reservations of Seats

A. **SCHEDULED CASTE (SC), SCHEDULED TRIBE (ST) & OTHER BACKWARD CLASSES (OBC)**

(i) ICMR provides Reservation for Scheduled Caste (SC), Scheduled Tribe (ST), Other Backward Classes (OBC) - Non Creamy Layer (NCL), wherever applicable and admissible as per instructions from Government of India.

(ii) All candidates, irrespective of category may be considered against General category vacancies, subject to fulfilment of parameters for General candidates. However, against the vacancies earmarked for specific categories (SC/ST/OBC), only candidates belonging to that community will be considered.
(iii) For availing reservation, SC/ST/OBC candidates should furnish Caste Certificate from competent authorities as per the format given at Annexure-II (for SC/ST candidates) and at Annexure-III (for OBC-NCL candidates) at the time of counselling. Further, in case of OBC candidates, the certificates should specifically indicate that they do not belong to the Persons/Sections (Creamy Layer) mentioned in Column 3 of the Schedule of the Government of India, Department of Personnel and Training O.M.No.36012/22/93-Estt. (SCT) dated 08.09.93 & its subsequent revision through O.M.No.36033/3/2004-Estt. (Res) dated 09.03.2004, 27.05.2013, 13.09.2017 and further revision, if any, received till the closing date for ONLINE Registration of applications for entrance exam. The candidates should ensure that they belong to the OBC category while applying for the posts. Such candidates should produce a valid OBC certificate in the prescribed format during document verification. Further, in addition to the category certificate (OBC), a declaration in the prescribed format as per Annexure-IV has to be furnished by the candidates during document verification, that he/she does not belong to the creamy layer. The certificate produced shall not be older than one year at the time of document verification. In case of not complying with these stipulations, their claim for reserved status (OBC) will not be entertained.

B. PERSONS WITH BENCHMARK DISABILITY (PwBD)

1. As per provisions (Chapter VI Clause 32) of the Rights of the Persons with Disabilities Act, 2016 Five percent of seats shall be reserved for PwBD who are Indian Nationals. The reservation will be provided on horizontal basis, as per their rank in order of merit in Entrance Exam.

2. CRITERIA FOR PwBD: In accordance with the provisions of the Rights of Persons with Disabilities Act, 2016, 5% seats of the sanctioned intake capacity shall be filled up by candidates with benchmark disabilities, based on the merit list of ICMR-JRF Entrance Exam. For this purpose, the Specified Disability contained in the Schedule to the Rights of Persons with Disabilities Act, 2016 is annexed in ANNEXURE-V. The candidate must possess a valid certificate certifying his/her physical disability. The disability certificate should be certified by a duly constituted and authorized Medical Board of the State or Central Govt. Hospitals/Institutions.

3. Degree of Benchmark Disability for Reservation and Competent Authority for Issue of Disability Certificate: Only such persons would be eligible for relaxation in conditions/reservation in posts who suffer from not less than 40 percent of relevant benchmark disability. Those PwBD who have availed the relaxation and/or reservation have to submit Certificate of Disability issued by the Competent Authority as per the form V, VI and VII of rule 18(1) under chapter 7 of Rights of Persons with Disabilities Rules, 2017 dated 15.06.2017. Refer Annexure-VI (A), Annexure-VI(B) and Annexure-VI(C) for the revised formats.

4. Assistance of Scribe: Visually Impaired (VI) candidates/candidates whose writing speed is affected by Cerebral Palsy/muscular dystrophy/candidates with Locomotor disability (one arm)/Intellectual disability (Autism, specific learning disability and mental illness) can avail the assistance of scribe for writing answers on their behalf. For engaging the scribe, candidates will have to intimate through email id icmrexampgichd@gmail.com at the time while filling ONLINE application form. Engagement of scribe will be subject to the following conditions:
i. Candidates will have to arrange for the scribe on their own.

ii. The qualification of the scribe should be one step below the qualification of the candidate taking entrance exam.

iii. The scribe so arranged should not himself/herself be the candidate for the ICMR-JRF entrance exam for which the candidate is appearing. Also same scribe should not be engaged for more than one candidate. The scribe and the candidate shall give a declaration to this effect. Any violation, if detected at any stage, will render both candidate and scribe disqualified.

iv. Candidates opting for scribe will have to provide additional details for scribes before closing date of submission of ONLINE application form as per Annexure-VII (A, B & C) so that ICMR/PGIMER can issue Call Letter for scribe and the same shall be signed by both candidate and scribe. Scribe should produce original and valid ID proof at the Examination Centre and bring passport size photograph.

v. Separate Call Letter will be issued to scribes accompanying the candidates.

vi. The candidate shall be responsible for any misconduct on the part of the scribe brought by him/her during the exam.

vii. Candidates availing the assistance of a scribe shall be eligible for compensatory time of not less than 20 minutes for every hour of entrance exam.

viii. Candidates who wish to avail services of scribe but are unable to furnish the details of scribe by the stipulated time, may avail the services of scribe by filling up necessary details in Format given at Annexure-VII (A, B & C) at the examination centre duly complying the conditions stipulated for scribe. The change of scribe may also be allowed in emergency duly recording reasons and filling the relevant details including pasting of photograph of the new scribe as per Annexure-VII (A, B & C).

5. All one eyed candidates and candidates whose visual degree of disability is less than 40% shall not be considered as Visually Impaired persons and the provision for engaging scribe shall not be applicable to them.

C. ECONOMICALLY WEAKER SECTIONS (EWS)

1. In reference to the Department of Personnel & Training (DOPT), GoI, order no. 36039/1/2019- Estt (Res) dated 31.01.19, 10% reservation for EWS category will be given only to the General Category candidates.

2. The General category candidates desirous of availing EWS quota of 10% reservation will be required to attach the Income and Assets certificate (Annexure-VIII).
### SUMMARY OF ICMR-JRF ENTRANCE EXAM PATTERN

(Please see the text for details and explanations)

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**Scheme of Exam**

The Exam will consist of one paper of two hours duration. The paper will consist of two Sections. The Aptitude Section (Section A) will have 50 questions on (i) scientific phenomenon in everyday life; (ii) general knowledge in sciences; and (iii) common statistics. All these questions would be compulsory with each question carrying 1 mark. The subject Specific Section (Section B & C) would pertain to (B) Life Sciences and (C) Social Sciences. Each area of section B & C would have 100 questions and the candidate will attempt any 75 questions in the predesigned area of Section B or C. In the online Computer-based exam, the system will not allow the candidate to attempt more than 75 questions. Candidates are required to indicate the option for Section B or C in the application form too.

Each question carries one mark. **Negative marking @ 0.25 will be made for each of the wrong answer.** The questions in both the Sections would appear in English only.

The qualifying marks will be 55% obtained in both the Sections (A+B or C) for General Category, EWS & OBC and 50% for SC/ST and PwBD.

The exam will be held in the following **streams**: (1) Aptitude test (common for all) (2) Life Sciences (3) Social Sciences. Subjects covered under **Life Sciences** include microbiology, physiology, molecular biology, genetics, human biology, biotechnology, biochemistry, bioinformatics, biophysics, immunology, pharmacology, nursing, zoology, botany, environmental sciences and veterinary science (excluding Agriculture extension/ Soil Science), *etc*. Subjects covered under **Social Sciences** include psychology, sociology, anthropology, social work, home sciences, statistics and Public health/Health economics (excluding others).
6. IMPORTANT INSTRUCTIONS

6.1 INSTRUCTIONS FOR FILLING THE ONLINE APPLICATION FORM

a) Candidate should fill in the Online Application with utmost care and follow the instructions and help manual as given in the USER MANUAL of the Prospectus, step by step. Candidate should fill in the Online Application form correctly. Incorrect filled form may lead to rejection.

b) A candidate seeking admission to the Entrance Exam is required to submit his/her application in the prescribed format available online with the Prospectus on www.pgimer.edu.in & http://icmr.nic.in

c) The cost of Application Form includes the fee for entrance exam which is non-refundable and no correspondence in this regard will be entertained. The candidate is required to go through the prospectus carefully and acquaint himself/herself with all requirements with regard to filling of the online application form.

d) **Online Registration:**

   (i) After selecting the online registration, fill the mandatory details asked for and deposit the prescribed fee through debit/credit card/Net Banking. After submitting fees filled required information step by step. Follow the instructions carefully.

   (ii) It will be the responsibility of the candidate to ensure that correct details are filled in the registration process. The Institute will not be responsible for any incorrect information/cancellation of candidature/loss or lack of communication etc. due to wrong filled online Application form.

   (iii) No candidate should register more than one application.

   (iv) All applicants are required to ensure that Photo/Signature is uploaded according to the instructions provided in the Prospectus. Failure to do so may result in rejection of applications.

   (v) Duplicate applications from any applicant will result in cancellation of all such applications. No intimation regarding such summary rejections will be provided.

e) **STATUS OF ONLINE REGISTRATION**

   i) Acknowledgement of successful Online registration will be forwarded to applicant’s registered Email ID. The registration form will remain Under Review regarding uploaded images and eligibility.

   ii) Admit Card for accepted registration form will only be uploaded on the website. If the status of registration form or admit card is not available on website, he/she should immediately write an email to the Registrar, PGIMER on Email: icmrexampgichd@gmail.com along with full particulars of the Registration Form.
f) DOCUMENTS TO BE ATTACHED WITH REGISTRATION SLIP

The candidates must upload their self attested/attested copies of certificates/documents in support of their educational qualifications, marks, date of birth, category etc. If a candidate fails to upload self attested copies of the requisite documents as above, his/her candidature will be cancelled and he/she will not be allowed to participate in subsequent stages of selection/admission process.

6.2 OTHER IMPORTANT INSTRUCTIONS

a) Keep a few identical photographs in reserve for use at the time of Entrance Examination/Admission.

b) Any deviation or discrepancy between actual appearance at the time of examination and facial appearance in the photograph pasted on the application/admit card will make the candidate liable for rejection.

c) Please take TWO printouts of the Online Application Form by logging in with your login ID and password. Affix the same passport size photograph (which was uploaded with the online form) on it and keep it safe with you. The candidate should ensure to take print out of application form after completing all details. DO NOT SEND IT TO US. This application printout with photograph affixed on it have to be submitted to ICMR New Delhi after declaration of result.

d) To download your Admit Card, you will visit PGIMER website: www.pgimer.edu.in or ICMR website: www.icmr.nic.in and click the same link 'ICMR-JRF Exam–2020' which will take you to the same portal where you had filled your online application form. Click on 'Login' button to login with your login ID and password. Click on 'PRINT ADMIT CARD' to download and print your Admit Card. (Please note that Admit Card(s) will NOT be sent by Post). Intimation about when to download the Admit Card will be sent to you through email. Roll Numbers/Admit Cards for appearing in the entrance examination will available for download to eligible candidates approximately 15 days before the date of entrance exam.

e) No TA will be paid to the candidates by ICMR for attending the exam or joining their place of work.

f) Candidates should note that their candidature is provisional. No candidate will be admitted to the test unless he/she holds the admission certificate to the test. The mere fact that an Acknowledgment Card/Admission Certificate has been issued to a candidate will not imply that his/her candidature has been finally accepted by the ICMR. Candidates may note that the verification of eligibility conditions of a candidate with reference to the documents as may be called for, will be taken up only after the candidate has qualified the exam.

g) A candidate is advised to fill up the Centre/Stream for examination properly. No change of Centre/Stream will be entertained.

h) In all matters such as the eligibility or otherwise of a candidate for admission to the Test or his/her subsequent qualifying in the Test the decision of the ICMR shall be final.

i) A candidate found canvassing and/or guilty of indiscipline in the Examination Hall or of using unfair means of any nature or of noting Questions shall be liable to be disqualified from this exam and future exams.
j) The award of JRF by the ICMR after successfully passing the examination will be subject to verification of documents i.e. proof of age, and qualifying marksheet/degree in M.Sc./M.A. (Final) or equivalent exam, with requisite percentage of marks and also SC/ST/OBC/PwBD/EWS certificates, if the candidate belongs to any of the these categories.

k) The exam will be conducted online mode i.e. Computer Based Test (CBT). Only visually handicapped candidates will be provided the help of a graduate level scribe in Science to Mark/Tick the answer for them. They will also be given 40 minutes extra (20 minutes per hour).

l) All disputes pertaining to the conduct of the Examination shall fall within the jurisdiction of National Capital Territory of Delhi only.

NB: The candidates must see the Admit Card/Roll No. for detailed instructions to be followed during entrance examination.

Disclaimer:- PGIIMER, Chandigarh/ICMR, New Delhi will not take any responsibility for any wrong/incorrect information filled in all the required fields in the application form, which may lead to disqualification of application.

REGISTRAR, PGIMER, CHD & Co-ordinator ICMR-JRF 2020 Exam
7. CANDIDATES SEEKING FEE CONCESSION

(a) A SC/ST candidate should submit a copy of the caste certificate about being SC/ST issued by the prescribed authority of Govt. of India (GoI), in English or Hindi. In case the caste/category certificate is in regional language the candidate should enclose an English/Hindi translation of the same duly notarised by a notary with the request for application form. For allowing concessions in this regard, ICMR follows only Central Govt. list and not State Govt. list. The SC/ST candidates should ensure from the Competent Authority issuing the caste certificate that their communities are enlisted in the common list of the GoI.

(b) A PwBD candidate should submit along with his/her application a copy of certificate about being handicapped obtained from a Government Hospital/Medical Board with the application form.

(c) An applicant claiming fee concession (and received by the ICMR within the closing date) but without an attested copy of a valid SC/ST/PH/VH certificate, will be summarily rejected.

Application fee paid for a particular examination will neither be adjusted for any subsequent examination nor refundable under any circumstances.

LIST OF CODES

(i) Subject Code: (Column 2 of application)

<table>
<thead>
<tr>
<th>Name of the Stream</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life Sciences</td>
<td>B</td>
</tr>
<tr>
<td>Social Sciences</td>
<td>C</td>
</tr>
</tbody>
</table>

(ii) Examination Centre Code (Column 1 of application)

<table>
<thead>
<tr>
<th>Examination Centre Code</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chandigarh</td>
<td>01</td>
</tr>
<tr>
<td>Chennai</td>
<td>02</td>
</tr>
<tr>
<td>Delhi (NCR)</td>
<td>03</td>
</tr>
<tr>
<td>Kolkata</td>
<td>04</td>
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<td>Mumbai</td>
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<tr>
<td>Hyderabad</td>
<td>06</td>
</tr>
<tr>
<td>Guwahati</td>
<td>07</td>
</tr>
<tr>
<td>Varanasi</td>
<td>08</td>
</tr>
<tr>
<td>Bhopal</td>
<td>09</td>
</tr>
<tr>
<td>Bhubaneswar</td>
<td>10</td>
</tr>
<tr>
<td>Srinagar (J&amp;K)</td>
<td>11</td>
</tr>
<tr>
<td>Bengaluru</td>
<td>12</td>
</tr>
</tbody>
</table>

Note: While PGIMER/ICMR shall make all possible efforts to allocate candidates in the cities chosen by them, however due to technical, logistic and other unforeseen reasons including non-availability of sufficient number of Examination Centres or Candidates in that or natural calamities etc. some Centres may be cancelled. Under such circumstances, PGIMER/ICMR shall re-allocate these candidates to alternate Centres in nearby cities. Such decisions shall be binding on all candidates.
Candidates qualifying for the award of JRF will receive fellowship from ICMR.

(i) The value of the fellowship is Rs. 31,000/- (Rupees Thirty One thousand only) per month.

(ii) The duration of fellowship will initially be limited until two years carrying a monthly stipend of Rs. 31,000/- and an annual contingency grant of Rs. 20,000/- per annum. The progress of research work would be evaluated annually through annual progress reports (APR). On completion of two years as a JRF, the stipend of a fellow may be increased to Rs. 35,000/- p.m. from 3rd year onwards on the basis of assessment of candidate’s research progress/achievements and upgradation report recommendation as submitted by the Institute’s Assessment Committee. Upon such a recommendation, the fellow will be called as a senior research fellow (SRF). In the event of the Committee not recommending upgradation, the fellow will continue as JRF with a stipend of Rs. 31,000/- per month for the 3rd year or his/her fellowship may be terminated depending on the decision of the Committee. The duration as SRF may be for a maximum duration of 03 years or until submission of Ph.D. thesis (whichever is earlier). **Thus, the total tenure as JRF plus SRF shall not exceed 5 (five) years.**

(iii) For further information, please see FAQs or contact the Division of HRD, Indian Council of Medical Research (ICMR), V. Ramalingaswami Bhawan, Ansari Nagar, Post Box 4911, New Delhi-110029, OR Registrar, Academic Section, Postgraduate Institute of Medical Education & Research (PGIMER), Chandigarh 160 012.

**Joining Time**

Selected candidates must join their respective fellowships on the prescribed date as indicated in their award letter by ICMR. The selection of those who fail to join by the specified date shall automatically stand cancelled.
Annexure-I

ATTESTATION

(By Head of the Institution from where the candidate has appeared OR will be appearing in M.Sc./MA Final Examination of (2019-2020).

I certify that the information given by the candidate Sh./Smt./Kumari…………………… has been checked by me and it is certified that the candidate is appearing/has appeared in MSc/MA (IV/VI Semester, whichever is applicable) in the final exam of the year (2019-2020) but result is awaited vide roll number_______________.

Name and signature of the Head of Institute

Place............
Date............

Rubber stamp/seal
ANNEXURE - II

FORM OF SCHEDULED CASTES (SC) AND SCHEDULED TRIBES (ST) CERTIFICATE PRESCRIBED

Form of certificate to be produced by SC/ST candidates applying for appointment to posts under the Government of India

CASTE CERTIFICATE

This is to certify that Shri/Smt./Kum. .................................................... son/daughter\* of .................................................... of village/Town\* ........................................... in district/Division\* ........................................... of the State/Union Territory\* ........................................... belongs to the.................... Caste/Tribe which is recognised as a Scheduled Caste/Scheduled Tribe* under:

1. @The Constitution (Scheduled Caste) Order, 1950
@The Constitution (Scheduled Tribe) Order, 1950
@The Constitution (Scheduled Caste) Union Territories Order, 1951
@The Constitution (Scheduled Tribe) Union Territories Order, 1951

2. Applicable in the case of Scheduled Caste/Scheduled Tribe persons who have migrated from one State/Union Territory/Administration to another.

This certificate is issued on the basis of the Scheduled Caste/Scheduled Tribe certificate issued to Shri/Smt/Kum\*, .................................................... son/daughter of Shri/Smt/Kum\*, .................................................... father/mother of Shri/Smt/Kum\*, .................................................... of village/town\* of District/Division\* ........................................... in State/Union Territory\* ........................................... who belongs to the.................... Caste/Tribe which is recognised as a Scheduled Caste/Scheduled Tribe* in the State/Union Territory* of .................................................... issued by the.................................. (Name of prescribed authority) vide their No. .................................. Date..........................

%2. Applicable in the case of Scheduled Caste/Scheduled Tribe persons who have migrated from one State/Union Territory/Administration to another.
%3. Shri/Smt./Kum*.............................................................and/or*his/her* family ordinary reside(s) in
Village/town*...............................................................of................................................................. State/Union Territory of.................................................................

Place:....................
Date:....................

Signature.............
**Designation...............**
(With seal of office)
State/Union Territory* ........................

* Please delete the words which are not applicable.
@ Please quote specific Presidential Order.
% Delete the paragraph which is not applicable.

NOTE: The term “ordinarily reside(s)” used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.

** List of authorities empowered to issue Scheduled Caste/Scheduled Tribe Certificate:

(i). District Magistrate/Additional District Magistrate/Collector/Deputy Commissioner/Additional Deputy Commissioner/Deputy Collector/1st Class Stipendiary Magistrate/Sub-divisional Magistrate/Taluka Magistrate/Executive Magistrate/Extra Assistant Commissioner. (not below of the rank of 1st Class Stipendiary Magistrate.)
(ii) Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate.
(iii) Revenue Officers not below the rank of Tehsildar.
(iv) Sub Divisional Officer of the area where the candidate and/or his/her family normally resides.
(v) Administrator/Secretary to Administrator/Development Officer (Lakshadweep)
ANNEXURE –III
FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES (OBC) APPLYING FOR ADMISSION TO CENTRAL EDUCATIONAL INSTITUTE (CEIs) UNDER THE GOVERNMENT OF INDIA

This is certify that Shri/Smt./Kum. __________________Son/Daughter of Shri/Smt._________________ of village ________________ District/Division ________________ in the ________________ State belongs to the ______________________ community which is recognized as a Backward Class under:-

(i) Resolution No.12011/68/93-BCC (C) dated 10/09/93 published in the Gazette of India Extraordinary Part I Section I No. 186 dated13/09/93.
(ii) Resolution No. 12011/9/94-BCC dated 19/10/94 published in the Gazette of India Extraordinary Part I Section I No. 163 dated20/10/94.
(iii) Resolution No. 12011/7/95-BCC dated 24/05/95 published in the Gazette of India Extraordinary Part I Section I No. 88 dated25/05/95.
(iv) Resolution No. 12011/96/94-BCC dated 9/03/96.
(vi) Resolution No. 12011/13/97-BCC dated 03/12/97.
(vii) Resolution No. 12011/95/94-BCC dated 11/12/97.

Sh./Smt./Kum. __________________Son/Daughter of Shri/Smt._________________ of village ________________ District/Division ________________ in the ________________ State. This is also to certify that he/she does not belong to the persons/sections (Creamy Layer) mentioned in Column 3 of the Schedule to the Government of India, Department of Personnel and Training, O.M. No. 36012/22/93-Estt. (SCT), dated 08.09.1993. Which is modified vide O.M. No.36033/3/2004 Estt. (Res.) dated 09.03.2004 or the latest modification of the Govt. of India.

Dated: ________________
District Magistrate/Competent Authority
With Seal

NOTE:

(a) The term 'Ordinarily' used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.
(b) The authorities competent to issue Caste Certificates are indicated below:
   (i) District Magistrate / Additional Magistrate / Collector / Deputy Commissioner / Additional Deputy Commissioner / Deputy Collector / 1st Class Stipendiary Magistrate / Sub-Divisional magistrate / Taluka Magistrate / Executive Magistrate / Extra Assistant Commissioner (not below the rank of 1st Class Stipendiary Magistrate).
   (ii) Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate.
   (iii) Revenue Officer not below the rank of Tehsildar.
   (iv) Sub-Divisional Officer of the area where the candidate and / or his family resides.
(c) The annual income/status of the parents of the applicant should be based on financial year ending March 31st...
DECLARATION TO BE SIGNED BY OBC CANDIDATES ONLY

I ................................. son/daughter of Shri ............................... resident of village/town/city ........................................ district........................ state ............................................................................................................ (certificate enclosed) hereby declare that I belong to the.................................................................................................................. community which is recognized as a backward class by the Govt. of India for the purpose of reservation in services as per orders contained in Department of Personnel and Training Office Memorandum No.36012/22/93-Esstt(SCT) dated 8-9-1993. It is also declared that I do not belong to the Persons/Sections (Creamy Layer) mentioned in Column 3 of the Schedule of the Government of India, Department of Personnel and Training O.M.No.36012/22/93-Esstt (SCT) dated 08.09.93 & its subsequent revision through O.M.No.36033/3/2004-Esst. (Res) dated 09.03.2004, 27.05.2013, 13.09.2017

Place.............................. (Signature of applicant in running handwriting)

Date..............................

Note: The closing date for receipt of application will be treated as the date of reckoning for OBC status of the candidate and also for as summing that the candidate does not fall in the creamy layer.
ANNEXURE – V

SELECTION CRITERIA FOR PERSONS WITH BENCHMARK DISABILITY (PwBD)

A SCHEDULE is annexed regarding, “SPECIFIED DISABILITY” clause (zc) of section 2, that states as under,

1. Physical disability

A. Locomotor disability (a person's inability to execute distinctive activities associated with movement of self and objects resulting from affliction of musculoskeletal or nervous system or both), including—

(a) "leprosy cured person" means a person who has been cured of leprosy but is suffering from—

   (i) loss of sensation in hands or feet as well as loss of sensation and paresis in the eye and eye-lid but with no manifest deformity;

   (ii) manifest deformity and paresis but having sufficient mobility in their hands and feet to enable them to engage in normal economic activity;

   (iii) extreme physical deformity as well as advanced age which prevents him/her from undertaking any gainful occupation, and the expression "leprosy cured" shall construed accordingly;

(b) "cerebral palsy" means a Group of non-progressive neurological condition affecting body movements and muscle coordination, caused by damage to one or more specific areas of the brain, usually occurring before, during or shortly after birth;

(c) "dwarfism" means a medical or genetic condition resulting in an adult height of 4 feet 10 inches (147 centimetres) or less;

(d) "muscular dystrophy" means a group of hereditary genetic muscle disease that weakens the muscles that move the human body and persons with multiple dystrophy have incorrect and missing information in their genes, which prevents them from making the proteins they need for healthy muscles. It is characterized by progressive skeletal muscle weakness, defects in muscle proteins, and the death of muscle cells and tissue;

(e) "acid attack victims" means a person disfigured due to violent assaults by throwing of acid or similar corrosive substance.

B. Visual impairment—

(a) "blindness" means a condition where a person has any of the following conditions, after best correction—

   (i) total absence of sight; or

   (ii) visual acuity less than 3/60 or less than 10/200 (Snellen) in the better eye with best possible correction; or 92

   (iii) Limitation of the field of vision subtending an angle of less than 10 degree.

(b) "low-vision" means a condition where a person has any of the following conditions, namely: —

   (i) Visual acuity not exceeding 6/18 or less than 20/60 upto 3/60 or upto 10/200 (Snellen) in the better eye with best possible corrections; or

   (ii) Limitation of the field of vision subtending an angle of less than 40 degree up to 10 degrees.

C. Hearing impairment-

(a) "Deaf" means persons having 70 DB hearing loss in speech frequencies in both ears;

(b) "hard of hearing" means person having 60 DB to 70 DB hearing loss in speech frequencies in both ears;
D. “Speech and language disability” means a permanent disability arising out of conditions such as laryngectomy or aphasia affecting one or more components of speech and language due to organic or neurological causes.

2. Intellectual disability, a condition characterized by significant limitation both in intellectual functioning (reasoning, learning, problem solving) and in adaptive behavior which covers a range of every day, social and practical skills, including—
   
   (a) "specific learning disabilities" means a heterogeneous group of conditions wherein there is a deficit in processing language, spoken or written, that may manifest itself as a difficulty to comprehend, speak, read, write, spell, or to do mathematical calculations and includes such conditions as perceptual disabilities, dyslexia, dysgraphia, dyscalculia, dyspraxia and developmental aphasia;
   
   (b) "autism spectrum disorder" means a neuro-developmental condition typically appearing in the first three years of life that significantly affects a person's ability to communicate, understand relationships and relate to others, and is frequently associated with unusual or stereotypical rituals or behaviours.

3. Mental behaviour,— "mental illness" means a substantial disorder of thinking, mood, perception, orientation or memory that grossly impairs judgment, behavior, capacity to recognize reality or ability to meet the ordinary demands of life, but does not include retardation which is a condition of arrested or incomplete development of mind of a person, specially characterized by sub normality of intelligence.

4. Disability caused due to—
   
   (a) chronic neurological conditions, such as—
      
      (i) "multiple sclerosis" means an inflammatory, nervous system disease in which the myelin sheaths around the axons of nerve cells of the brain and spinal cord are damaged, leading to demyelination and affecting the ability of nerve cells in the brain and spinal cord to communicate with each other;
      
      (ii) "Parkinson’s disease" means a progressive disease of the nervous system marked by tremor, muscular rigidity, and slow, imprecise movement, chiefly affecting middle-aged and elderly people associated with degeneration of the basal ganglia of the brain and a deficiency of the neurotransmitter dopamine.
   
   (b) Blood disorder—
      
      (i) "haemophilia" means an inheritable disease, usually affecting only male but transmitted by women to their male children, characterized by loss or impairment of the normal clotting ability of blood so that a minor would may result in fatal bleeding;
      
      (ii) "thalassemia" means a group of inherited disorders characterized by reduced or absent amounts of haemoglobin.
      
      (iii) "sickle cell disease" means a haemolytic disorder characterized by chronic anaemia, painful events, and various complications due to associated tissue and organ damage; "haemolytic" refers to the destruction of the cell membrane of red blood cells resulting in the release of haemoglobin.

5. Multiple Disabilities (more than one of the above specified disabilities) including deaf blindness which means a condition in which a person may have combination of hearing and visual impairments causing severe communication, developmental, and educational problems.

6. Any other category as may be notified by the Central Government.

Note: Any amendment to the Schedule to the RPWD Act, 2016, shall consequently stand amended in the above schedule.
FORM-V
Certificate of Disability
(In cases of amputation or complete permanent paralysis of limbs or dwarfism and in cases of blindness)

[See Rule 18(1)]

(NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE CERTIFICATE)

Certificate No.:………………………………………………… Date: ……………………..….

This is to certify that I have carefully examined Shri / Smt / Kum ……………………….. son /
wife / daughter of Shri …………………………………………………………………….. Date of Birth
…………………………. (DD/MM/YYYY) Age………… Years, Male/Female ……… Registration No.
…………………………………………… Permanent Resident of House No. …………………… Ward /
Village / Street ……………… Post Office…………………… District……………………. State
…………………………….., whose photograph is affixed above, and am satisfied that:

(A) He/she is a case of:
   *Locomotor Disability
   *Dwarfism
   *Blindness
   (Please tick as applicable)

(B) The diagnosis in his/her case is …………………………………………………

   (1) He / She has ……………% (in figure)…………………… percent (in words)
   permanent Locomotor disability / dwarfism/blindness in relation to his/her
   …………………………….. (part of body) as per guidelines (to be specified).

   (2) The applicant has submitted the following document as proof of residence:

<table>
<thead>
<tr>
<th>Nature of Document</th>
<th>Date of Issue</th>
<th>Details of authority issuing certificate</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Signature/Thumb Impression of the person in whose favour disability certificate is issued

(Signature and Seal of Authorized Signatory of notified Medical Authority)
FORM VI
Certificate of Disability
(In case of multiple disabilities)
[See Rule 18(1)]

(NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE CERTIFICATE)

Certificate No:………………………………… Date: ……………………….

1. This is to certify that we have carefully examined Shri/Smt./ Kum……………………………………………….…….. son/wife/daughter Of Shri…………………………….……..… Date of Birth……………………(DD/MM/YYYY)

Resident of House No. ….….. Ward/Village/Street ………….…………….. whose photograph is affixed above and are satisfied that:

(A) He/She is a case of **Multiple Disability**. His / Her extent of permanent physical impairment/disability has been evaluated as per guidelines (to be specified) for the disabilities ticked below and shown against the relevant disability in the table below:

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Disability</th>
<th>Affected Part of Body</th>
<th>Diagnosis</th>
<th>Permanent Physical Impairment/ Mental Disability (in%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Locomotors Disability</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Muscular Dystrophy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Leprosy cured</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Dwarfism</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Cerebral Palsy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Acid attack Victim</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Low Vision</td>
<td>#</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Blindness</td>
<td>#</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Deaf</td>
<td>E</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Hard of Hearing</td>
<td>E</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Speech and Language disability</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Intellectual Disability</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Specific Learning Disability</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>14</td>
<td>Autism Spectrum Disorder</td>
<td></td>
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<td>15</td>
<td>Mental illness</td>
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<td>16</td>
<td>Chronic Neurological Conditions</td>
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<tr>
<td>17</td>
<td>Multiple Sclerosis</td>
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<tr>
<td>18</td>
<td>Parkinson’s Disease</td>
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<tr>
<td>19</td>
<td>Hemophilia</td>
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<td></td>
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<tr>
<td>20</td>
<td>Thalassemia</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Sickle Cell disease</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(B) In the light of the above, his/her overall permanent physical impairment as per guidelines (to be specified), is as follows:

In figures: ………………………..percent , In words : ……………………………...percent

2. This condition is progressive/non-progressive/likely to improve/not likely to improve.

3. Reassessment of disability is :
   i) not necessary, Or
   ii) is recommended/after ……………….Year …………………….…months, and therefore this certificate shall be valid till ………………………………………………(DD/MM/YYYY)

@ e.g. Left/Right/both arms/legs; # e.g Single eye/both eyes; £e.g. Left/Right/both ears

4. The applicant has submitted the following document as proof of residence:

<table>
<thead>
<tr>
<th>Nature of Document</th>
<th>Date of issue</th>
<th>Details of authority issuing certificate</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

5. Signature and seal of the Medical Authority

<table>
<thead>
<tr>
<th>Name and seal of Member</th>
<th>Name and seal of Member</th>
<th>Name and seal of the Chairperson</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Signature/Thumb Impression of the person in whose favour disability certificate is issued
FORM-VII
Certificate of Disability
{In case of other than those mentioned in Forms V and VI i.e. Annexure VI (A & B)}
[See Rule 18(1)]

(NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE CERTIFICATE)

Certificate No.:………………………………… Date: ……………………….

1. This is to certify that we have carefully examined Shri/Smt./Kum …………………………………………………… son/wife/daughter Of Shri …………………………………………………… Date of Birth……………………(DD/MM/YYYY)

   Age…………years, Male/Female .............. Registration No. ………………… Permanent
   Resident of House No. .......... Ward/Village/Street ………………………… whose photograph is
   affixed above and are satisfied that He/She is a case of ………………………………………………….. Disability. His / Her extent of permanent physical impairment/disability has been evaluated as per guidelines (to be specified) for the disabilities ticked below and shown against the relevant disability in the table below:

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Disability</th>
<th>Affected Part of Body</th>
<th>Diagnosis</th>
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<td>Leprosy cured</td>
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<td>Cerebral Palsy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Acid attack/Victim</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Low Vision</td>
<td>#</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Deaf</td>
<td>£</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Hard of Hearing</td>
<td>£</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Speech and Language disability</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>10</td>
<td>Intellectual Disability</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>11</td>
<td>Specific Learning Disability</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Autism Spectrum Disorder</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Mental illness</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Chronic Neurological Conditions</td>
<td></td>
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<tr>
<td>15</td>
<td>Multiple Sclerosis</td>
<td></td>
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<tr>
<td>16</td>
<td>Parkinson’s Disease</td>
<td></td>
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<tr>
<td>17</td>
<td>Hemophilia</td>
<td></td>
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<tr>
<td>18</td>
<td>Thalassemia</td>
<td></td>
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<tr>
<td>19</td>
<td>Sickle Cell disease</td>
<td></td>
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</tbody>
</table>

(B) In the light of the above, his/her overall permanent physical impairment as per guidelines (to be specified), is as follows:
   In figures: ……………………….. percent , In words : ……………………………... percent

2. This condition is progressive/non-progressive/likely to improve/not likely to improve.

3. Reassessment of disability is:
   i) not necessary, Or
   ii) is recommended/after ……………….Year …………………….…months, and therefore this certificate shall be valid till ……………………………..(DD/MM/YYYY)

   @ e.g. Left/Right/both arms/legs; # e.g Single eye/both eyes; £e.g. Left/Right/both ears

4. The applicant has submitted the following document as proof of residence:

<table>
<thead>
<tr>
<th>Nature of Document</th>
<th>Date of issue</th>
<th>Details of authority issuing certificate</th>
</tr>
</thead>
</table>

5. Signature and seal of the Medical Authority

   Countersigned [ (Countersignature and seal of the CMO / Medical Supdt.)
   Superintendent / Head of Government Hospital in case the certificate is issued by a
   medical authority who is not a government servant (with seal)]

   [Authorised Signatory of notified Medical Authority] (Name and Seal)

   Signature/Thumb Impression of the person in whose favour disability certificate is issued

Note: In case this certificate is issued by a medical authority who is not a government servant, it shall be valid only if countersigned by the Chief Medical Officer of the District. The principal rules were published in the Gazette of India vide notification number S.O. 908(E), dated the 31st December, 1996 issued.
LETTER OF UNDERTAKING FOR USING SCRIBE

NOTE: Candidates who are Visually Impaired (VI)/candidates whose writing speed is affected by Cerebral Palsy / muscular dystrophy / candidates with Locomotor disability (one arm)/Intellectual disability (Autism, specific learning disability and mental illness) are eligible for Scribe. PARTICULARS OF SCRIBE PROPOSED TO BE ENGAGED BY THE CANDIDATE

1. Name of the Candidate ........................................................
2. Roll No ………………………………………………………….
3. Name of Examination Centre ………………………………………….
4. Qualification of Candidate .............................................
5. Disability Type ........................................................................
6. Name of the Scribe ............................................................
7. Date of Birth of the Scribe …................................................
8. Father’s Name of the Scribe .................................................
9. Address of the Scribe : 
   (a) Permanent Address ..........................................................
   .................................................................
   (b) Present Address ............................................................
   .................................................................
10. Educational Qualification of the Scribe .................................
    ..................................................................................................
11. Relationship, if any, of the Scribe to the Candidate…………..
    .............................................................................................
12. DECLARATION:
   i) We hereby declare that the particulars furnished above are true and correct to the best of our knowledge and belief. We have read/ been read out the instructions of the PGIMER regarding conduct of the candidates assisted by Scribe/Scribes at this examination and hereby undertake to abide by them.
   ii) We do hereby undertake that the qualification of scribe is mentioned correctly and the qualification of the scribe is one step below qualification of candidate. In case, subsequently it is found qualification of scribe is not as declared by the candidate, I (the candidate) shall forfeit my right to the post and claims relating thereto.
   iii) We declare that the Scribe himself/herself is not a candidate in this examination. We understand that in case it is found otherwise the candidature of both of us will be rejected.
   iv) We declare that the scribe has not acted/will not act as Scribe to any other candidate of this examination.

(Signature of the Candidate)

Left thumb impression of the Candidate in the box given above

(Signature of the Scribe)

Left thumb impression of the Scribe in the box given above

Signature of the Observer/Office Supdt. of the Examination Centre
Certificate regarding physical limitation in an examinee to write

This is to certify that I have carefully examined Shri/Smt./ Kum ...................................................................(name of the candidate with disability) a person with........................................(nature and percentage of disability as mentioned in the certificate of disability, son/wife/daughter Of Shri ...................................................................... a Resident of ................................. Village/District/State and to ensure that he/she has physical limitation which hampers his/her writing capabilities owing to his/her disability.

Signature
Chief Medical Officer/Civil Surgeon/Medical Superintendent of a Government Health Care Institution
Name and Designation
Name of Govt Hospital/Health Care Centre with Seal

Place:
Date:

Note:
Certificate should be given by a specialist of the relevant stream/disability (e.g. Visual Impairment- Ophthalmologist, Locomotor disability-Orthopaedic specialist/PMR)
ANNEXURE – VII (C)

Letter of Undertaking for Using Own Scribe

I ____________________________, a candidate with (name of the disability) appearing for the ____________________________ (name of the examination) bearing Roll No. ____________________________ at ____________________________ (name of the Centre) in the District ____________________________, ____________________________ (name of the State). My qualification is ____________________________.

I do hereby state that ____________________________ (name of the scribe) will provide the service of scribe/reader (✓ tick appropriate) for the undersigned for taking the ICMR-JRF 2020 Examination. My (scribe/reader ✓ tick appropriate) qualification is ____________________________ (proof enclosed- self attested).

I do hereby undertake that qualification of my Scribe/reader (✓ tick appropriate) is ____________________________. In case, subsequently it is found that his/her qualification is not as declared by the undersigned and is beyond my qualification, I shall forfeit my right to the selection and claims relating thereto.

(Signature of the candidate with Disability)

Photo of the Scribe/Reader

Paste recent self-attested passport size photograph of the Scribe/Reader

(Signature of the Scribe/Reader ✓ tick appropriate)

Place:

Date:
ANNEXURE- VIII
Format for Income and Assets Certificate to be produced by Economically Weaker Sections (EWS)

Government of... .............
(Name & Address of the authority issuing the certificate)

INCOME & ASSETS CERTIFICATE TO BE PRODUCED BY ECONOMICALLY WEAKER SECTIONS

Certificate No. ___________ Date: ___________

VALID FOR THE YEAR ___________

This is to certify that Shri/Smt./Kumari _______________ son/daughter/wife of _______________ permanent resident of _______________, Village/Street __________________ Post Office __________________ District _______________ in the State/Union Territory __________________ Pin Code _______________ whose photograph is attested below belongs to Economically Weaker Sections, since the gross annual income* of his/her ‘family’** is below Rs. 8 lakh (Rupees Eight Lakh only) for the financial year _____ His/her family does not own or possess any of the following assets***:

I. 5 acres of agricultural land and above;
II. Residential flat of 1000 sq. ft. and above;
III. Residential plot of 100 sq. yards and above in notified municipalities;
IV. Residential plot of 200 sq. yards and above in areas other than the notified municipalities.

2. Shri/Smt./Kumari _______________ belongs to the _______ caste which is not recognized as a Scheduled Caste, Scheduled Tribe and Other Backward Classes (Central List)

Signature with seal of Office ___________
Name ___________
Designation ___________

Recent Passport size attested photograph of the applicant

*Note1: Income covered all sources i.e. salary, agriculture, business, profession, etc.

**Note 2: The term “Family” for this purpose include the person, who seeks benefit of reservation, his/her parents and siblings below the age of 18 years as also his/her spouse and children below the age of 18 years

***Note 3: The property held by a “Family” in different locations or different places/cities have been clubbed while applying the land or property holding test to determine EWS status.
Steps involved in the filling of the application form of PGIMER include registration, candidate login, etc. The steps are mentioned below.

1. Registration
2. Candidate Login
3. Payment of fee
4. Printing of Confirmation page

The Detailed process of filling the application form of ICMR-JRF 2020 Exam

Step 1: ICMR-JRF 2020 registration

The application process begins with the basic registration of candidates. For this the candidates are required to follow the steps below: Visit the Official website.

• Then click on the Specific “Exam Name” for which you want to fill the application form
• Then click on ‘New Registration’ and you will be directed to registration form page
• The entries in registration form cannot be changed once submitted, hence, ensure that you enter the required information as below correctly.
• Name of Candidate: This should be the same as on Matric certificate.
• Date of Birth: Use the calendar icon to select the correct date.
• Gender: Enter your gender (Male/Female/Others)
• Mobile Number: Should be valid and unique. You will receive your User ID and Password as an SMS on this number only.
• Email Address: Should be valid and unique. You will receive your User ID and Password on this email address only.
• Captcha: The Captcha box is a special set of characters displayed on the screen. You will need to retype the characters in the box provided. This is a safety feature designed to ensure that a human is entering the details and not a computer program. If you have trouble reading the characters, click on ‘Get a new image’ to refresh the letters.
• By selecting the ‘Submit’ button, you are committing to be honest and fair in all your actions and information provided in the Registration Form.

• Confirmation of Registration
• Within minutes of submitting the Registration Form, you will receive a User ID and password on the registered email address from the Administrator. Ensure that you check your mailbox immediately and that it is not considered as spam mail.
• You will also receive the User ID and Password as an SMS* on the registered mobile number. Using these credentials, you may proceed to complete your application. (*Please note SMS will not be sent to international numbers)
• This ends Step 1 of the Registration Process.

Step 2: Fill Application Form

Registered Users Click on ‘Applicant login’ to access the Application form with User ID and password received on your email and mobile number.
Click on the ‘Go to Application Form’ button and please read the important instruction carefully. The Application Form is categorized into the following three sections:
1. Personal Details
2. Qualification Details
3. Test Centre Details

Read the Note on pop-up page of the form before you begin filling the information. You need to fill section-wise application form. Once the mandatory details in a section are filled, you can move to the next section by clicking on Save and Next. However, you will not be allowed to navigate to next section, if mandatory information is not filled or the required documents are not uploaded. To navigate back to the previous section, you can click on the name of the previous section tab.

Once you have completed the last section and then, click on ‘Submit’ button, you will be re-directed to make the payment. Once payment is done, your application is considered complete. Post this, changes to application can be done but, are applicable to limited fields only as defined above.

*Please note: Once the form is submitted, payment has to be made for the particular Exam to ensure the particular exam City chosen by you is assigned to you.

ICMR-JRF 2020 Test Stream/Cities

(i) Stream Code
Life Science B
Social Science C

(ii) Examination Centre Code
Chandigarh 01
Chennai 02
Delhi (NCR) 03
Kolkata 04
Mumbai 05
Hyderabad 06
Guwahati 07
Varanasi 08
Bhopal 09
Bhubaneswar 10
Srinagar (J&K) 11
Bengaluru 12

Photograph and signature upload

- Candidates have to upload their scanned photograph and signature as per specifications. The photograph and signature should not appear blurry after upload.
- Save signature as "Candidate Signature.jpg" and photograph as "Candidate Photograph.jpg"
- The photograph must be taken with the candidate holding a placard having his/her name and date of taking the photograph (refer to the picture attached below)
Step 3: Payment of ICMR-JRF 2020 application fee

Candidates who complete the above steps have to make the application fee payment. Special care should be taken while making payment as fee for application form is non-refundable under any circumstances. Fee will only be accepted through Net Banking/Credit Card/Debit Card.

Application Form of ICMR-JRF Exam - Do’s and Don'ts

The following points regarding ICMR-JRF application form 2020 are important and candidates are required to go through them thoroughly for a clear idea about how to fill the form:

- Candidates are advised to fill their application forms using Internet Explorer (version 11) or Mozilla Firefox (version 50 to 61) or Google Chrome (50 to 69 version).
- The process of filling application form is complete only after the confirmation page gets displayed on screen.
- The fee submitted by candidates while filling the application form will not be refunded under any circumstances.
- The data submitted once will not be changed under any situation at any time. Applications with false information will be rejected.
- Candidates need to make sure that detail on their ID proof and mark sheet match with the ICMR-JRF 2020 application form.
- Black & white/Polaroid photographs will not be accepted.

Frequently Asked Question (FAQs) – ICMR-JRF Application Form 2020

Q.1. Will be there be a correction window facility for ICMR-JRF application form 2020?
Answer - Correction Window will be available only for if there is any update in Candidate Photograph & Signature. Thus, candidates are advised to fill the application form carefully.

Q.2. Can I submit the ICMR-JRF application form in the offline mode?
Answer - No, candidates must fill the application form of ICMR-JRF 2020 in online mode only. Any other form of the application form will not be accepted.

Q.3. How can I pay the application fee?
Answer - The application fee of ICMR-JRF registration 2020 has to be paid in online mode. Candidates can use methods like credit/debit card or internet banking to pay the fee.