

Institute of Physics

(An Autonomous Research Institute of Dept. of Atomic Energy, Govt. of India)
P:O: SAINIK SCHOOL, BHUBANESWAR – 751005

Web: www.iopb.res.in

ADVERTISEMENT NO.IOP/Rectt/04/2025

WALK-IN INTERVIEW CONSULTANT IN ELECTRICAL SECTION

Applications are invited from the individuals who are retired as Electrician from Government Service and below the age of sixty-four years having valid license & good service records and are physically fit for the positions of consultants in the Electrical Section of the Institute of Physics, Bhubaneswar. The terms of appointment shall ordinarily for an initial period of one year which is extendable by another one year depending on the requirement.

Particulars	Essential Qualification etc.	Remuneration
Consultant in	1. 10 th pass with ITI Certificate in	As per DAE,
Electrical Section,	Line Man.	Govt. of India
Institute of Physics,	2. Valid 33 KV Electrical License	Guidelines.
Bhubaneswar,	issued by the Electrical Inspector,	
Odisha, India.	Workman Permit, Govt. of Odisha.	

Eligible candidates may apply in the prescribed formant latest by 30.09.2025 with Medical Fitness Certificate etc. and should reach in the Address "Director, Institute of Physics, Bhubaneswar-751005. Application received after the due date of without the prescribed documents or otherwise found incomplete or in the prescribed proforma are liable to be rejected.

CTM: Walk-in interview on 07.10.2025 at 10.00 AM in the Institute premises.

REGISTRAR Institute of Physics Bhubaneswar

Application for Re-engagement of retired employees in the Institute of Physics, Bhubaneswar

1	Full Name (in Block Letters)	
2	Father's Name/Husband's Name	
3	Date of Birth	
4	Contact Details	Telephone
		Mobile
		E-mail id
5	Address for communication	<u>'</u>
6	Date of joining of Government Service/ Work experience in Govt. Organizations	
7	Age as on date	
8	Whether SC/ST/OBC	
9	Whether Physically handicapped	
10	Date of retirement and the post from which retired (enclose copy of Retirement Order)	
11	Name of the Division/Unit from which	
	retired	
12	Last Pay Drawn (Please enclose copy)	
13	Education/Technical Qualification (Please enclose copy of Certificate/Mark sheet)	
14	PPO No. (Please enclose copy)	
15	Details of Computer Knowledge	
16	Brief particulars of experience of the last 10 years (assignment-wise a separate sheet may be annexed)	

I hereby declare that the particulars furnished above are true and correct to the best of my knowledge and belief. I understand and agree that in the event of any information being found false or incorrect/incomplete or ineligibility being detected at any time before or after selection/interview, my candidature is liable to be rejected and I shall be bound by the decision of the Institute of Physics, Bhubaneswar. I have read this advertisement and ready to accept all the terms and conditions for engagement.

Place:	
Date:	

Institute of Physics
BHUBANESWAR

Affix recent colour passport size photograph

APPLICATION FOR WALK-IN INTERVIEW

PER	SONAL INFORMA	TION:				
1.	Name in full ((ca		: Mı	r./Ms		_
2.	Father's / Husba	nd's name	:			
3.	Address for com	munication:			Per	manent Address:
4.	(a) Telepho (b) email I	ne No.: D	:			
5.	Gender		: Ma	ale / Femal	e	
6.	Marital status		:			
7.	Date of birth		:			
8.	Age in completed	d years	:			
9. 10 !	Category EDUCATIONAL Q	IIALIEICATION:				amy layer) / PWD /Ex- is not applicable)
	Exam passed	Board /	Year of	Div/	%age of	Major Subjects
	std. or equivalent	University	passing	Grade	marks	Wajoi Subjects
	Std. or ITI or etc.					
12	sta. of fir of etc.					
Anv	other qualification :					
(i)	care quantication.					
(ii)						
(iii)						

Position he	eld	Organization	From	То	Completed years	Nature of duty	
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. Details o	of quali	ification/Knowledg	ge/Experien	ce in Con	nputer Applicat	ions.	
4. Enclosur	res to b	e attached:					
SI No.	Descri	otion of document(s	5)				
1 Copies of Certificates and mark sheets duly attested							
	2 Nos. of recent color passport size photographs						
3	Experie	ence certificate(s) in	original				
4							
5							
6							
7							
			DEGE AD	AFFOR			
			DECLAR	ATION			
I dec	lare th	at the above infor	mation fur	niched by	me is true and	correct to the bes	
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y knowled	lge an	d belief. In the e	vent of dis	screpancy	arising due to	any false or wr	
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tormation	provic	led by me and trac	ced later or	i, I shall b	e held respons	ible for the same	
all abide b	v the o	decision of the cor	nnetent aut	thority on	the matter.		
	. ,		potoni au		o matter.		
ace:							

Date:

Signature of the applicant