UNIVERSITY OF MUMBAI'S

GARWARE INSTITUTE OF CAREER EDUCATION & DEVELOPMENT

(Autonomous since 2006)

Vidyanagari, Kalina, Santacruz (East), Mumbai - 400 098.

Tel.: 022 - 6919 5605 / 06, Accts. 6919 5607, Exam Unit: 6919 5614

E-mail: garware@giced.mu.ac.in Website : www.gicededu.co.in



No. GICED/ 994

of 2023

Date: 17/07/2023

NOTICE

Applications are invited from the eligible candidates for the following post at University of Mumbai's, Garware Institute of Career Education and Development (GICED). Eligible candidates are requested to come on 28th July, 2023 at University of Mumbai's, Garware Institute of Career Education and Development, Vidyanagari, Kalina Campus, Santacruz (E), Mumbai 400 098 at 10.30 a.m. along with their resume, necessary documents filled prescribed form and detail of qualification and experience of post on UM-GICED and Mumbai University website. The appointment will be made for 6 months. The post is on purely temporary contractual basis on consolidated salary.

Post Name: Workshop Technician

Qualifications: B.Sc (Chemistry)/ B.Sc (Tech.) in Paint Technology or Diploma in Paint

Application Technology

Salary: Rs. 21,600/- Consolidated P.M.

Experience : 2 Years Experience in Chemistry Laboratory of any

Educational Institute.

Desirable : : 1) Preparation and standardization of Reagents.

2) Operation and Maintenance of instruments.

3) To assist faculty to conduct practical's

4) Follow up job for field work for students.

5) Follow up the purchase of chemicals and glasswares.

6) Stock taking for chemicals and glasswares.

7) Preparation of list of Chemicals and glasswares.

8) Conversant in Testing of Paints, Pigments and Solvents

9) Application of Paints, Brushing, Spraying etc.

Age Limit: Not less than 21 years and Not more than 45 years

Date: 17th July, 2023

Dr. Keyurkumar Nayak

Mayar

Director

Affix Serial number of the post advertised: passport D.D. to be enclosed for Open Category Rs.200 and size Reserved Category Rs.100 photo dated D.D. No. Name of the Bank and Branch: DD to be drawn in favour of The Director, Garware Institute of Career Education and Development. To, The Director, Garware Institute of Career Education And Development Vidyanagari, Kalina, Santacruz (East), Mumbai - 400 098. Sub: Application for the post of _____ Please [√] wherever applicable 1. Name in full Surname Shri/Smt./Kum. First name (in BLOCK Middle name letters) Mother's Name 2. Current postal address (in BLOCK letters) Email ID Mobile No. Tel. No. 3. Date of Birth Months Age Years Days Birth Place Nationality Male/Female Married/Unmarried

4.

S.C.	S.T.	D.T./N.T.				O.B.C.	OPEN
		D.T.(A)	N.T.(B)	N.T.(C)	N.T.(D)		
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	S.C.	S.C. S.T.	The state of the s	S.C. S.T.	S.C. S.T.	S.C. S.T.	S.C. S.T. O.B.C.

5. Post applied under which category (Open/Reserved):

6.

Examination	University/ Board	Month and Year of Passing	Subject	Percentage of Marks obtained	Class/ Division
S.S.C.					
H.S.C.					
Graduate					
Post- Graduate	•				
Doctor's Degree					
Any other qualification					

7.

		Technical Qua	difications	•	
Examination	English Typing/ Shorthand	Marathi Typing/ Shorthand	Month and Year of Passing	Percentage of Marks obtained	Class/ Division
MS-CIT					
Typing					
Shorthand					

8.

Institution/ Organization	Year	Position Held	Nature of Appointment	Period of appointment with dates

9. Other Qualifications and experience, if any.

a) Present position:	
b) Name of Institution/ Organization where employed:	
c) Salary:	
Pay Rs in the pay-scale (pay band) of R	
D.A. Rs.	
H.R.A. Rs.	
C.L.A. Rs.	
Other Rs.	
Allowances, if any	
Total Rs.	
d) Date of appointment :	
(e) Date of next increment :	
f) Attach Last Pay Certificate, if any	
Names of persons who have given testimonials (if any) 1)	
2)	
2)	
3)	

I hereby declare that all statements made by me in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false, incomplete or incorrect, my candidature/appointment is liable to be cancelled/terminated. I further understand that no notice shall be taken of any request for withdrawal of my application.

Place:

Date: