



चित्तरंजन राष्ट्रीय कैंसर संस्थान

CHITTARANJAN NATIONAL CANCER INSTITUTE

(स्वास्थ्य और परिवार कल्याण मंत्रालय के तहत एक स्वायत्त संस्थान, भारत सरकार)

(An Autonomous Institute under Ministry of Health and Family Welfare, Govt. of India)

प्रथम कैंपस - 37, एस. पी. मुखर्जी रोड, कोलकाता - 700 026/1st Campus - 37, S. P. Mukherjee Road, Kolkata - 700 026

द्वितीय कैंपस - स्ट्रीट नंबर 299, प्लॉट नंबर डीजे - 01, परिसर नंबर 02-0321, एक्शन एरिया 1डी, न्यू टाउन, कोलकाता - 700160

2nd Campus - Street No.299, Plot No. DJ - 01, Premises No. 02-0321, Action Area 1D, New Town, Kolkata - 700160

Advt No: H/ 08/2025

Dated: 19th December 2025

Director, CNCI, Kolkata, invites applications for filling up the following post of Assistant Pharmacist in the Hospital unit of this Institute for Hazra Campus **under outsourced agency**.

Name of Post	No. of Posts	Age Limit	Qualification	Tenure	Remuneration
Assistant Pharmacist	01	35 Years	Diploma in Pharmacy from a recognized Institution/Board. Should be registered pharmacist under Pharmacy Act 1948.	Initially for a period of 01 (year) which may be extended subject to satisfactory performance and requirement of the Institute.	Rs. 26,059/-

Duly completed applications along with original and self-attested copies of relevant documents have to be submitted at the time of Walk-In Interview which will be held on **26th December 2025 (Friday)** from 11:00 AM at CNCI Hazra Campus.

DIRECTOR

General Instructions

- i)** This is to be noted that mere submission of application or receipt of Admit Card / Call Letter or appearance in examination/interview does not guarantee selection/ appointment in the respective post. The applicants will be short-listed on the basis of criteria fixed by the Institute, at the time of scrutiny. Selection of candidates will be made strictly based on merit position, available vacancy, and verification of original documents / certificates. The decision of the Institute in this regard will be final and binding.
- ii)** While applying for the above posts, the applicant must ensure that he / she fulfills the eligibility criteria including academic and professional qualifications as per the NOTIFICATION and other norms mentioned above as on the specified dates. In case it is detected at any stage of recruitment/ selection that a candidate does not fulfill the eligibility norms and / or that he / she has furnished any incorrect / false / wrong information or has suppressed any material fact(s), his / her candidature will automatically stand cancelled. If any of the above shortcoming(s) is / are detected even after appointment, his / her service may be terminated.
- iii)** No interim queries will be entertained. The Institute Authority reserves the right to reject any/all applications without assigning any reason whatsoever. However, the number of vacancies may vary.
- iv)** CNCI reserves the right to cancel / restrict / enlarge / modify / alter the Recruitment Process, if needed, without issuing any further notice or assigning any reason there for. The decision of the Institute in this regard will be final and binding.
- v)** The declared vacancies are tentative and may increase/decrease.
- vi)** Candidates are informed to check the website www.cnci.ac.in regularly for any updates.
- vii)** Legal Jurisdiction will be Kolkata in case of any dispute.
- viii)** Incomplete applications will summarily be rejected and no interim queries will be entertained in this regard.



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(Application form for the Post of Assistant Pharmacist)

Please attach recent
passport size photograph
(not less than 3 months old)

1.	Name of the position applied for & the Advt. No.			
2.	Name of the Candidate (in BLOCK CAPITAL)			
3.	Father's / Husband's Name			
4.	Address for communication, in full with telephone number, email, etc.			
5.	Permanent Address in full with telephone number, email etc.			
6.	Date of Birth			
7.	Gender (Male/Female/Others)			
8.	Category (UR/OBC/ST/ST)			
9.	Academic qualifications *			
Sl. No.	Degree / Diploma	Year of passing	University / Institute	Division /Grade

9.	List of publications, if any (kindly attach additional sheet, if required)	
10.	Experience	
11.	Present employment status	

I hereby declare that the information given above is true and complete to the best of my knowledge and belief.

Dated:

(Signature of the Candidate)