

Date: 28/07/2025

### **Advertisement for the Position of Project Associate**

Applications are invited from the interested candidates for the post of **Project Associate** to work on the R&D project titled **"Design and Development of Message Authentication Techniques for NavIC"** supported by SAC (ISRO). The selected candidate will be appointed for one year (on contract) or till completion of the project whichever is earlier, based on the performance review.

Position: - Project Associate No. of Position = 01 Consolidated Salary= Rs. 31,000/- (per month) +HRA

#### **Eligibility:**

M.Tech./MS/M.E./equivalent in Electronics and Communication Engineering/Communication Engg/ Signal Processing/Image Processing/Computer Science and Engineering/any other relevant M.Tech Specialization degree. Candidates must have at least 6.5/10 CGPA or 60 percent marks in aggregate from a recognized technical institute or university as a full-time program.

#### Or

M.Sc./M.Tech with Mathematics/Physics/Computer Science/Data Science. Candidates must have at least 6.5/10 CGPA or 60 percent marks in aggregate from a recognized university or technical institute as a full-time program.

Age limit: 35 years



#### **Application Process:**

Interested candidates must apply with the following documents: (1) Cover letter (2) Filled-in Application Form (3) Bio-data with passport-sized photograph, (4) Scanned copies of educational certificates and mark sheets, class XII onwards and (5) Scanned copies of Proof for research experience, special achievements and publications, if any (6) Valid ID proof. The soft copies of all the above documents in single pdf format must be emailed to the Principal Investigator (Dr. Jothi Ramalingam) on or before 11th August 2025. The email address for correspondence is given below. No TA/DA will be paid for attending the written test/interview. The appointment will be on a purely temporary basis co-terminus with the project. Candidates who are already employed should produce relieving certificates from their employers, if selected. The shortlisted candidates with the date of written test/interview will be intimated by email only.

#### Address for Correspondence:

To, Dr. R Jothi Ramalingam Principal Investigator, Dept. of Mathematical and Computational Sciences NITK Surathkal Mangalore-575025 India. Telephone:0824-2473266 Mob. 9962055208

Email: jothiram@nitk.edu.in



### **Application for the Position of Project Associate**

| 1. Post Applied for | : Project Associate |
|---------------------|---------------------|
|---------------------|---------------------|

2. Name of the Candidate (BLOCKLETTER):

3. Father's Name (BLOCKLETTER):

4. Mother's Name (BLOCKLETTER):

5. (a) Date of Birth: (DD/MM/YYYY)\_\_\_\_\_

(b) Sex (Male/Female/Other):\_\_\_\_\_

(c) Marital Status: Married/Single

(d) Category: SC/ST/OBC/PWD/Open

6. Previous Research experience: (use additional sheet if required)

7. Publication(s), if any: (use additional sheet if required)

8. GATE/ UGC-NET (Qualified) details, if any: Score: \_\_\_\_\_ Rank: \_\_\_\_\_ Specialization: \_\_\_\_\_ Year: \_\_\_\_\_

9. Academic Qualification: (Starting from Standard 10 or equivalent Examination)

| Exam<br>Passed | School/College/Instit<br>ute/ University | Year of<br>Passing | Discipline/<br>Specialization | Percentage<br>of Marks/<br>CGPA |
|----------------|------------------------------------------|--------------------|-------------------------------|---------------------------------|
|                |                                          |                    |                               |                                 |
|                |                                          |                    |                               |                                 |
|                |                                          |                    |                               |                                 |

Paste here a recent Passport size Photograph



10. (a) Address for Communication: (BLOCKLETTER):

- (b) Contact No (Mob): (c) E-mail ID :
- 11. Contact Details of two referees:

|                      | Referee I | Referee II |
|----------------------|-----------|------------|
| Name :               |           |            |
| Designation :        |           |            |
| Organization:        |           |            |
| Office Address :     |           |            |
| Office Phone Number: |           |            |
| Email ID:            |           |            |

12. Experience if any (in years and use additional sheet if required)

I do hereby declare that the information furnished in this application is true to the best of my knowledge and belief. If selected, I promise to abide by the rules and regulations of the Institute.

Date: Place:

Signature

Note- If any information is required, an extra A4 sheet may be attached.