Department of Computer Technology
Madras Institute of Technology
Anna University
Chennai – 600 044.

Ref. No. : TNSCST/STP/Covid-19/2020-21/3696   Date: 06-07-2021

Notification for Appointment of Technical Assistant in the TNSCST-S&T Funded Project

Applications are invited for the temporary post of one Technical Assistant to work in the project funded by Tamil Nadu State Council for Science and Technology (TNSCST) in the Department of Computer Technology, MIT, Anna University – Chennai- 44.

Title of the Project	Diagnosis of Covid-19 with CT images using transfer learning and hybrid learning techniques
Duration of Project	One Year and Six Months
Name of the post & No. of Post	Technical Assistant & 01
Essential Qualifications	First Class in HSC or equivalent or Diploma (Computer Engineering)
Desirables	Candidates having higher qualifications knowledge and experience in related work/projects will be preferred.
Emoluments	A consolidated salary of Rs.5,000/- per month will be paid.

Eligible and interested candidates are requested to send the completed application (hard copy either by registered/speed post/courier along with an advance copy of application through e-mail) along with necessary enclosures (Attested copies of certificates) in the prescribed format on or before **24.07.2021**. Short listed candidates will be called for the interview. The date and time for the interview will be informed to the candidate only through e-mail. No TA/DA will be paid for attending the interview.

For Further Detail and Clarifications Please Contact
Dr. P. Varalakshmi

Principal Investigator – TNSCST Funded Project

Associate Professor,

Department of Computer Technology,

Madras Institute of Technology,

Anna University,

Chennai-44.

E-Mail : varanip@gmail.com

Project : **"Diagnosis of Covid-19 with CT images using transfer learning and hybrid learning techniques"**

<u>Application for the post of Technical Assistant</u>

1. Name of the Applicant   :
2. Date of Birth   :
3. Contact Details   :
   3.1 Complete Address for Correspondence (with Pincode)

   3.2 E-Mail ID
   3.3 Telephone No./Mobile
4. Educational Qualifications :
   (In chronological order from Graduation onwards)

S.No	Degree	Specialization	University / Institution	Year of Passing	Percentage	Division

5. Additional Qualification
6. Professional experience

Name of the Institution	Designation	Period		Nature of Work
		From	To	

7. Additional information, if any
8. List of enclosure

Declaration

I declare that the information furnished above is true and correct to the best of my knowledge and belief that no related information is concealed. If any discrepancies observed at any stage, the Institute shall have the right to expel me from the Institute at any time after my selection. I note that the decision of the Institute is final in regard to selection. I agree that I shall abide by the decision of the Institute, which shall be final.

Place :

Date :   Signature of the Applicant