

**NATIONAL INLAND NAVIGATION INSTITUTE**

(Inland Waterways Authority Of India)
(Ministry of Ports, Shipping and Waterways, Govt. of India)
Gaighat, Patna – 800 007. Tel- 0612-2311200



The National Inland Navigation Institute (NINI), Patna invites application for the empanelment of Visiting Specialist/Mariners, Senior Faculty (Deck & Engine), Surveyor, Doctor, Faculty & Instructor for the period of 01 (One Year) which may be extended on performance and need basis.

Sl. No.	Position	Essential / Minimum Qualification
1.	Sr. Faculty (Nautical/Engineering) and Doctor (MBBS)	As per D.G. Shipping eligibility criteria for faculties.
2.	Surveyor and Examiner for Inland Vessel	As per Bihar Inland Vessel Rule 2013.
3.	Faculty (Deck/Engine) for Inland Vessel	Holder of Certificates of Competency as 1st Class Master/IV Engineer or License Engineer of Inland Vessel with 5 year service.
4.	Instructor for Inland Vessel	Retired JCO/NCO & Petty Officer from Army/Navy in the relevant field with 2 years experience or 2nd Mate FG.

❖ Application/Bio-data along with attested photocopies of certificates may be forwarded to the Principal, National Inland Navigation Institute, West of Mahatma Gandhi Setu, Gaighat, Gulzarbagh, Patna – 800 007 by 23rd Nov. 2021 by Speed post / by hand or e-mail – info@niniedu.in. Applications received earlier in regard to earlier advertisement shall be considered and need not to apply again.

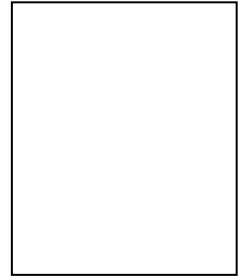
Interested applicants are advised to download the Bio-Data form from the website of NINI www.niniedu.in

Principal

Size- 8 x 8



NATIONAL INLAND NAVIGATION INSTITUTE



APPLICANT'S (BIO- DATA/ RESUME)

**FOR THE EMPANELMENT OF VISITING SPECIALIST / MARINERS, SURVEYOR, DOCTOR,
SENIOR FACULTY, FACULTY & INSTRUCTOR (DECK & ENGINE)**

Category for empanelment _____

Capt./Dr./Mr./Mrs./Miss _____

Surname _____ Middle Name _____ First Name _____

Date & Place of Birth _____

Passport No. _____ Date & Place of Issue _____ Valid till _____

INDos No. _____ FIN No. _____

Address _____

_____ Tel: _____ Mobile: _____

E-mail: _____

Marital Status _____ Spouse's Name _____

Number of Children _____ Name / Age: _____

Next of kin _____ Relationship _____

Address of Next of kin _____ Tel: _____

Qualification: Academic _____ Professional _____

Member of Professional bodies / Organization(s): _____

Last Organization _____

Shore Experience _____

Interests / Hobbies _____

Contributions which can be made to the institute: _____



NATIONAL INLAND NAVIGATION INSTITUTE

S.N.	Name of Exam	Name of Board/ University	Total Marks	% of Marks
01.	Matriculation			
02.	Higher Secondary			
03.	Graduation			
04.	Post Graduation			
05.	Any Other			

SEA SERVICE (if applicable)

Company	Type of Vessel	GRT/BHP	Type of Engine	RANK	DATE		Duration
					From	To	

(Attach additional sheet if required)

Courses Attended	Certificate Number	Date of issue	Date of expiry

I certify that the information furnished above is correct and true to the best of my knowledge and belief. I understand that if any information is found false my application will be treated as cancelled.

Date: _____

Place: _____

(Name & Signature of the applicant)