



INDIAN INSTITUTE OF TECHNOLOGY PATNA
BIHTA PATNA-801106
RESEARCH & DEVELOPMENT UNIT

ADVERTISEMENT NO: R&D/1084/SEC/520

DATED: 30.10.2025

Project No: R&D/SP/MATH/SEC/2024-25/1084

Applications are invited in the prescribed format only for the following assignment in a purely time bound research project undertaken in this institute.

1. (a) Name of the temporary assignment : Research Associate
(b) Number of Post : 01
(c) Duration of the Post : Three Years (Initially for one year and may be extended for the next years also based on the performance)
2. Name of the temporary research project : State estimation for control systems governed by DAEs
3. Name of the sponsoring Agency : ANRF (SERB)
4. Consolidated Fellowship/Salary : 58000/- per month + HRA as applicable
5. Qualifications & Experience : PhD in Control Theory or related area.

The candidate desirably should have pre-PhD degree with a minimum CPI of 6.0 or 60% of marks. The upper age limit for applying for the position shall be 35 years. Relaxations for SC/ST/OBC/women/PD will be given as per the GOI rules. Working/research experience in the field of estimation theory will be given preference.

The interested candidates may submit their application for this position via email to nktomar@iitp.ac.in by attaching all the relevant documents along with the application form. The application form is appended in this advertisement.

An **online interview** will be conducted for all the shortlisted candidates on **November 11, 2025**. The meeting link and the schedule for the same will be shared with the shortlisted candidates via email.

For any query contact Project Investigator: **Dr. Nutan Kumar Tomar, Dept. of Mathematics, IIT Patna, Emails: nktomar@iitp.ac.in**

Assistant Registrar

Copy to:

1. Associate Dean, R&D, IIT Patna
2. Advertisement file
3. Project file



Form No: RD-M003

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FORMAT OF APPLICATION FOR RESEARCH ASSOCIATE

Name & Address Including email id and Phone no. (for Correspondence)	Category (GEN/OBC/EWS /SC/ST/PD)	DOB dd/ mm/yyyy	PhD Details (Thesis Title/ Date of viva- voce/ Name of Supervisor with address and e-mail id)
NAME IN CAPITAL Address: Phone: Email:			
Educational Qualification			
Institute/ Board	Exam Passed	Year of Passing	% of Marks/CPI
	10 th Class		
	12 th Class		
	Bachelors (B.Sc/B.Tech) or equivalent		
	Masters (M.Sc/M.Tech/MA) or equivalent		

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Signature of applicant

Date:

Place: